



ANNUAL STATEMENT

For the Year Ended December 31, 2016  
of the Condition and Affairs of the

West Virginia National Auto Insurance Company

NAIC Group Code..... 0, 0	NAIC Company Code..... 10911	Employer's ID Number..... 55-0758679
(Current Period) (Prior Period)		
Organized under the Laws of WV	State of Domicile or Port of Entry WV	Country of Domicile US
Incorporated/Organized..... April 29, 1998	Commenced Business..... June 1, 1998	
Statutory Home Office	330 Scott Avenue - Suite 2..... Morgantown ..... WV ..... US ..... 26508	
	(Street and Number) (City or Town, State, Country and Zip Code)	
Main Administrative Office	330 Scott Avenue - Suite 2..... Morgantown ..... WV ..... US..... 26508	304-296-0507
	(Street and Number) (City or Town, State, Country and Zip Code)	(Area Code) (Telephone Number)
Mail Address	330 Scott Avenue - Suite 2..... Morgantown ..... WV ..... US ..... 26508	
	(Street and Number or P. O. Box) (City or Town, State, Country and Zip Code)	
Primary Location of Books and Records	330 Scott Avenue - Suite 2..... Morgantown ..... WV ..... US ..... 26508	304-296-0507
	(Street and Number) (City or Town, State, Country and Zip Code)	(Area Code) (Telephone Number)
Internet Web Site Address	www.wvnational.com	
Statutory Statement Contact	David Charles Remmells	304-296-0507-0210
	(Name)	(Area Code) (Telephone Number) (Extension)
	dremmells@wvnational.com	304-296-3425
	(E-Mail Address)	(Fax Number)

OFFICERS

Name	Title	Name	Title
1. James Walter Buchanan Jr.	President	2. David Charles Remmells	Secretary
3. David Charles Remmells	Treasurer	4.	

OTHER

DIRECTORS OR TRUSTEES

James Walter Buchanan Jr.	William Bernard Kania	Parry George Petroplus	David Mitchell Maynard
George William Marshall			

State of..... West Virginia  
County of..... Monongalia

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC *Annual Statement Instructions and Accounting Practices and Procedures* manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

(Signature)	(Signature)	(Signature)
James Walter Buchanan Jr.	David Charles Remmells	David Charles Remmells
1. (Printed Name)	2. (Printed Name)	3. (Printed Name)
President	Secretary	Treasurer
(Title)	(Title)	(Title)

Subscribed and sworn to before me	a. Is this an original filing?	Yes [ X ] No [ ]
This 24th day of February 2017	b. If no	
	1. State the amendment number	
	2. Date filed	
	3. Number of pages attached	

ASSETS

	Current Year			Prior Year
	1	2	3	4
	Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	Net Admitted Assets
1. Bonds (Schedule D).....	5,085,990	0	5,085,990	5,656,480
2. Stocks (Schedule D):				
2.1 Preferred stocks.....	0	0	0	0
2.2 Common stocks.....	0	0	0	235,596
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens.....	0	0	0	0
3.2 Other than first liens.....	0	0	0	0
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$.....0 encumbrances).....	0	0	0	0
4.2 Properties held for the production of income (less \$.....0 encumbrances).....	0	0	0	0
4.3 Properties held for sale (less \$.....0 encumbrances).....	0	0	0	0
5. Cash (\$.....66,069, Schedule E-Part 1), cash equivalents (\$.....0, Schedule E-Part 2) and short-term investments (\$.....42,086, Schedule DA).....	108,155	0	108,155	(99,275)
6. Contract loans (including \$.....0 premium notes).....	0	0	0	0
7. Derivatives (Schedule DB).....	0	0	0	0
8. Other invested assets (Schedule BA).....	0	0	0	0
9. Receivables for securities.....	0	0	0	0
10. Securities lending reinvested collateral assets (Schedule DL).....	0	0	0	0
11. Aggregate write-ins for invested assets.....	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11).....	5,194,145	0	5,194,145	5,792,801
13. Title plants less \$.....0 charged off (for Title insurers only).....	0	0	0	0
14. Investment income due and accrued.....	49,451	0	49,451	54,260
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection.....	390,464	0	390,464	1,314,288
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$.....0 earned but unbilled premiums).....	0	0	0	0
15.3 Accrued retrospective premiums (\$.....0) and contracts subject to redetermination (\$.....0).....	0	0	0	0
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers.....	348,843	0	348,843	716,363
16.2 Funds held by or deposited with reinsured companies.....	0	0	0	0
16.3 Other amounts receivable under reinsurance contracts.....	0	0	0	0
17. Amounts receivable relating to uninsured plans.....	0	0	0	0
18.1 Current federal and foreign income tax recoverable and interest thereon.....	0	0	0	0
18.2 Net deferred tax asset.....	917,445	508,593	408,852	522,912
19. Guaranty funds receivable or on deposit.....	0	0	0	0
20. Electronic data processing equipment and software.....	0	0	0	0
21. Furniture and equipment, including health care delivery assets (\$.....0).....	869	869	0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates.....	0	0	0	0
23. Receivables from parent, subsidiaries and affiliates.....	0	0	0	0
24. Health care (\$.....0) and other amounts receivable.....	0	0	0	0
25. Aggregate write-ins for other-than-invested assets.....	27,124	27,124	0	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25).....	6,928,341	536,586	6,391,755	8,400,624
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....	0	0	0	0
28. TOTAL (Lines 26 and 27).....	6,928,341	536,586	6,391,755	8,400,624

DETAILS OF WRITE-INS

1101. ....	0	0	0	0
1102. ....	0	0	0	0
1103. ....	0	0	0	0
1198. Summary of remaining write-ins for Line 11 from overflow page.....	0	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above).....	0	0	0	0
2501. Prepaid Expenses.....	24,791	24,791	0	0
2502. Lease Trade-in Allowance.....	2,333	2,333	0	0
2503. ....	0	0	0	0
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0	0	0
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above).....	27,124	27,124	0	0

West Virginia National Auto Insurance Company

LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Year	2 Prior Year
1. Losses (Part 2A, Line 35, Column 8).....	2,003,833	2,326,158
2. Reinsurance payable on paid losses and loss adjustment expenses (Schedule F, Part 1, Column 6).....	0	0
3. Loss adjustment expenses (Part 2A, Line 35, Column 9).....	451,741	474,946
4. Commissions payable, contingent commissions and other similar charges.....	138,568	272,447
5. Other expenses (excluding taxes, licenses and fees).....	74,711	39,095
6. Taxes, licenses and fees (excluding federal and foreign income taxes).....	23,176	(11,243)
7.1 Current federal and foreign income taxes (including \$.....0 on realized capital gains (losses)).....	0	0
7.2 Net deferred tax liability.....	0	0
8. Borrowed money \$.....0 and interest thereon \$.....0.....	0	0
9. Unearned premiums (Part 1A, Line 38, Column 5) (after deducting unearned premiums for ceded reinsurance of \$.....166,969 and including warranty reserves of \$.....0 and accrued accident and health experience rating refunds including \$.....0 for medical loss ratio rebate per the Public Health Service Act).....	622,224	1,005,153
10. Advance premium.....	92,161	140,878
11. Dividends declared and unpaid:		
11.1 Stockholders.....	0	0
11.2 Policyholders.....	0	0
12. Ceded reinsurance premiums payable (net of ceding commissions).....	138,206	469,201
13. Funds held by company under reinsurance treaties (Schedule F, Part 3, Column 19).....	0	0
14. Amounts withheld or retained by company for account of others.....	6,762	26,303
15. Remittances and items not allocated.....	0	0
16. Provision for reinsurance (including \$.....0 certified) (Schedule F, Part 8).....	0	0
17. Net adjustments in assets and liabilities due to foreign exchange rates.....	0	0
18. Drafts outstanding.....	0	0
19. Payable to parent, subsidiaries and affiliates.....	10,223	13,670
20. Derivatives.....	0	0
21. Payable for securities.....	0	509
22. Payable for securities lending.....	0	0
23. Liability for amounts held under uninsured plans.....	0	0
24. Capital notes \$.....0 and interest thereon \$.....0.....	0	0
25. Aggregate write-ins for liabilities.....	143,891	117,662
26. Total liabilities excluding protected cell liabilities (Lines 1 through 25).....	3,705,496	4,874,779
27. Protected cell liabilities.....	0	0
28. Total liabilities (Lines 26 and 27).....	3,705,496	4,874,779
29. Aggregate write-ins for special surplus funds.....	0	0
30. Common capital stock.....	1,001,000	1,001,000
31. Preferred capital stock.....	0	0
32. Aggregate write-ins for other-than-special surplus funds.....	0	0
33. Surplus notes.....	0	0
34. Gross paid in and contributed surplus.....	1,999,000	1,999,000
35. Unassigned funds (surplus).....	(313,741)	525,845
36. Less treasury stock, at cost:		
36.1 .....0.000 shares common (value included in Line 30 \$.....0).....	0	0
36.2 .....0.000 shares preferred (value included in Line 31 \$.....0).....	0	0
37. Surplus as regards policyholders (Lines 29 to 35, less 36) (Page 4, Line 39).....	2,686,259	3,525,845
38. TOTAL (Page 2, Line 28, Col. 3).....	6,391,755	8,400,624

DETAILS OF WRITE-INS		
2501. Uncashed checks pending escheatment to state.....	143,891	117,662
2502. ....	0	0
2503. ....	0	0
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above).....	143,891	117,662
2901. ....	0	0
2902. ....	0	0
2903. ....	0	0
2998. Summary of remaining write-ins for Line 29 from overflow page.....	0	0
2999. Totals (Lines 2901 through 2903 plus 2998) (Line 29 above).....	0	0
3201. ....	0	0
3202. ....	0	0
3203. ....	0	0
3298. Summary of remaining write-ins for Line 32 from overflow page.....	0	0
3299. Totals (Lines 3201 through 3203 plus 3298) (Line 32 above).....	0	0

STATEMENT OF INCOME

UNDERWRITING INCOME		
	1	2
	Current Year	Prior Year
1. Premiums earned (Part 1, Line 35, Column 4).....	4,130,528	5,087,038
DEDUCTIONS:		
2. Losses incurred (Part 2, Line 35, Column 7).....	2,934,002	4,263,769
3. Loss adjustment expenses incurred (Part 3, Line 25, Column 1).....	928,605	996,696
4. Other underwriting expenses incurred (Part 3, Line 25, Column 2).....	1,409,421	1,624,440
5. Aggregate write-ins for underwriting deductions.....	0	0
6. Total underwriting deductions (Lines 2 through 5).....	5,272,028	6,884,905
7. Net income of protected cells.....	0	0
8. Net underwriting gain (loss) (Line 1 minus Line 6 plus Line 7).....	(1,141,500)	(1,797,867)
INVESTMENT INCOME		
9. Net investment income earned (Exhibit of Net Investment Income, Line 17).....	94,949	115,768
10. Net realized capital gains (losses) less capital gains tax of \$.....0 (Exhibit of Capital Gains (Losses)).....	11,317	23,823
11. Net investment gain (loss) (Lines 9 + 10).....	106,266	139,591
OTHER INCOME		
12. Net gain (loss) from agents' or premium balances charged off (amount recovered \$.....2,192 amount charged off \$.....25,007).....	(22,815)	(138,387)
13. Finance and service charges not included in premiums.....	316,088	635,913
14. Aggregate write-ins for miscellaneous income.....	4,752	7,698
15. Total other income (Lines 12 through 14).....	298,025	505,224
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15).....	(737,209)	(1,153,052)
17. Dividends to policyholders.....	0	0
18. Net income, after dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Line 16 minus Line 17).....	(737,209)	(1,153,052)
19. Federal and foreign income taxes incurred.....	0	0
20. Net income (Line 18 minus Line 19) (to Line 22).....	(737,209)	(1,153,052)
CAPITAL AND SURPLUS ACCOUNT		
21. Surplus as regards policyholders, December 31 prior year (Page 4, Line 39, Column 2).....	3,525,845	4,532,795
22. Net income (from Line 20).....	(737,209)	(1,153,052)
23. Net transfers (to) from Protected Cell accounts.....	0	0
24. Change in net unrealized capital gains or (losses) less capital gains tax of \$.....0.....	2,754	(7,266)
25. Change in net unrealized foreign exchange capital gain (loss).....	0	0
26. Change in net deferred income tax.....	117,278	412,166
27. Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 28, Column 3).....	(222,409)	(258,798)
28. Change in provision for reinsurance (Page 3, Line 16, Column 2 minus Column 1).....	0	0
29. Change in surplus notes.....	0	0
30. Surplus (contributed to) withdrawn from Protected Cells.....	0	0
31. Cumulative effect of changes in accounting principles.....	0	0
32. Capital changes:		
32.1 Paid in.....	0	0
32.2 Transferred from surplus (Stock Dividend).....	0	0
32.3 Transferred to surplus.....	0	0
33. Surplus adjustments:		
33.1 Paid in.....	0	0
33.2 Transferred to capital (Stock Dividend).....	0	0
33.3. Transferred from capital.....	0	0
34. Net remittances from or (to) Home Office.....	0	0
35. Dividends to stockholders.....	0	0
36. Change in treasury stock (Page 3, Lines 36.1 and 36.2, Column 2 minus Column 1).....	0	0
37. Aggregate write-ins for gains and losses in surplus.....	0	0
38. Change in surplus as regards policyholders for the year (Lines 22 through 37).....	(839,586)	(1,006,950)
39. Surplus as regards policyholders, December 31 current year (Line 21 plus Line 38) (Page 3, Line 37).....	2,686,259	3,525,845

DETAILS OF WRITE-INS		
0501. ....	0	0
0502. ....	0	0
0503. ....	0	0
0598. Summary of remaining write-ins for Line 5 from overflow page.....	0	0
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 5 above).....	0	0
1401. Return Check Processing Fees.....	900	600
1402. Gain on Vehicle Disposal.....	3,852	7,000
1403. Class Action Settlement Proceeds.....	0	98
1498. Summary of remaining write-ins for Line 14 from overflow page.....	0	0
1499. Totals (Lines 1401 through 1403 plus 1498) (Line 14 above).....	4,752	7,698
3701. Lines 23 and 29 from 2000 Annual Statement.....	0	0
3702. ....	0	0
3703. ....	0	0
3798. Summary of remaining write-ins for Line 37 from overflow page.....	0	0
3799. Totals (Lines 3701 through 3703 plus 3798) (Line 37 above).....	0	0

CASH FLOW

	1 Current Year	2 Prior Year
CASH FROM OPERATIONS		
1. Premiums collected net of reinsurance.....	4,291,711	5,506,343
2. Net investment income.....	163,668	200,119
3. Miscellaneous income.....	298,025	505,224
4. Total (Lines 1 through 3).....	4,753,404	6,211,686
5. Benefit and loss related payments.....	2,888,807	4,357,348
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts.....	0	0
7. Commissions, expenses paid and aggregate write-ins for deductions.....	2,425,079	2,896,699
8. Dividends paid to policyholders.....	0	0
9. Federal and foreign income taxes paid (recovered) net of \$.....0 tax on capital gains (losses).....	0	0
10. Total (Lines 5 through 9).....	5,313,886	7,254,047
11. Net cash from operations (Line 4 minus Line 10).....	(560,482)	(1,042,361)
CASH FROM INVESTMENTS		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds.....	1,252,043	1,971,096
12.2 Stocks.....	239,215	300,102
12.3 Mortgage loans.....	0	0
12.4 Real estate.....	0	0
12.5 Other invested assets.....	0	0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments.....	0	0
12.7 Miscellaneous proceeds.....	0	0
12.8 Total investment proceeds (Lines 12.1 to 12.7).....	1,491,258	2,271,198
13. Cost of investments acquired (long-term only):		
13.1 Bonds.....	734,493	1,597,785
13.2 Stocks.....	514	238,237
13.3 Mortgage loans.....	0	0
13.4 Real estate.....	0	0
13.5 Other invested assets.....	0	0
13.6 Miscellaneous applications.....	509	231
13.7 Total investments acquired (Lines 13.1 to 13.6).....	735,516	1,836,253
14. Net increase (decrease) in contract loans and premium notes.....	0	0
15. Net cash from investments (Line 12.8 minus Lines 13.7 minus Line 14).....	755,742	434,945
CASH FROM FINANCING AND MISCELLANEOUS SOURCES		
16. Cash provided (applied):		
16.1 Surplus notes, capital notes.....	0	0
16.2 Capital and paid in surplus, less treasury stock.....	0	0
16.3 Borrowed funds.....	0	0
16.4 Net deposits on deposit-type contracts and other insurance liabilities.....	0	0
16.5 Dividends to stockholders.....	0	0
16.6 Other cash provided (applied).....	12,170	28,618
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6).....	12,170	28,618
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS		
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17).....	207,430	(578,798)
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year.....	(99,275)	479,523
19.2 End of year (Line 18 plus Line 19.1).....	108,155	(99,275)

Note: Supplemental disclosures of cash flow information for non-cash transactions:

20.0001 .....	0	0
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West Virginia National Auto Insurance Company  
UNDERWRITING AND INVESTMENT EXHIBIT

PART 1 - PREMIUMS EARNED

Line of Business		1  Net Premiums Written per Column 6, Part 1B	2  Unearned Premiums December 31 Prior Year- per Col. 3, Last Year's Part 1	3  Unearned Premiums December 31 Current Year- per Col. 5, Part 1A	4  Premiums Earned During Year (Cols. 1 + 2 - 3)
1.	Fire.....	0	0	0	0
2.	Allied lines.....	0	0	0	0
3.	Farmowners multiple peril.....	0	0	0	0
4.	Homeowners multiple peril.....	0	0	0	0
5.	Commercial multiple peril.....	0	0	0	0
6.	Mortgage guaranty.....	0	0	0	0
8.	Ocean marine.....	0	0	0	0
9.	Inland marine.....	0	0	0	0
10.	Financial guaranty.....	0	0	0	0
11.1	Medical professional liability - occurrence.....	0	0	0	0
11.2	Medical professional liability - claims-made.....	0	0	0	0
12.	Earthquake.....	0	0	0	0
13.	Group accident and health.....	0	0	0	0
14.	Credit accident and health (group and individual).....	0	0	0	0
15.	Other accident and health.....	0	0	0	0
16.	Workers' compensation.....	0	0	0	0
17.1	Other liability - occurrence.....	0	0	0	0
17.2	Other liability - claims-made.....	0	0	0	0
17.3	Excess workers' compensation.....	0	0	0	0
18.1	Products liability - occurrence.....	0	0	0	0
18.2	Products liability - claims-made.....	0	0	0	0
19.1, 19.2	Private passenger auto liability.....	3,316,160	742,335	545,452	3,513,043
19.3, 19.4	Commercial auto liability.....	0	0	0	0
21.	Auto physical damage.....	431,439	262,818	76,772	617,485
22.	Aircraft (all perils).....	0	0	0	0
23.	Fidelity.....	0	0	0	0
24.	Surety.....	0	0	0	0
26.	Burglary and theft.....	0	0	0	0
27.	Boiler and machinery.....	0	0	0	0
28.	Credit.....	0	0	0	0
29.	International.....	0	0	0	0
30.	Warranty.....	0	0	0	0
31.	Reinsurance - nonproportional assumed property.....	0	0	0	0
32.	Reinsurance - nonproportional assumed liability.....	0	0	0	0
33.	Reinsurance - nonproportional assumed financial lines.....	0	0	0	0
34.	Aggregate write-ins for other lines of business.....	0	0	0	0
35.	TOTALS.....	3,747,599	1,005,153	622,224	4,130,528

DETAILS OF WRITE-INS

3401.	.....	0	0	0	0
3402.	.....	0	0	0	0
3403.	.....	0	0	0	0
3498.	Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0

West Virginia National Auto Insurance Company

UNDERWRITING AND INVESTMENT EXHIBIT

PART 1A - RECAPITULATION OF ALL PREMIUMS

Line of Business		1	2	3	4	5
		Amount Unearned (Running One Year or Less from Date of Policy) (a)	Amount Unearned (Running More Than One Year from Date of Policy) (a)	Earned But Unbilled Premium	Reserve for Rate Credits and Retrospective Adjustments Based on Experience	Total Reserve for Unearned Premiums Cols. 1 + 2 + 3 + 4
1.	Fire.....	.....0	.....0	.....0	.....0	.....0
2.	Allied lines.....	.....0	.....0	.....0	.....0	.....0
3.	Farmowners multiple peril.....	.....0	.....0	.....0	.....0	.....0
4.	Homeowners multiple peril.....	.....0	.....0	.....0	.....0	.....0
5.	Commercial multiple peril.....	.....0	.....0	.....0	.....0	.....0
6.	Mortgage guaranty.....	.....0	.....0	.....0	.....0	.....0
8.	Ocean marine.....	.....0	.....0	.....0	.....0	.....0
9.	Inland marine.....	.....0	.....0	.....0	.....0	.....0
10.	Financial guaranty.....	.....0	.....0	.....0	.....0	.....0
11.1	Medical professional liability - occurrence.....	.....0	.....0	.....0	.....0	.....0
11.2	Medical professional liability - claims-made.....	.....0	.....0	.....0	.....0	.....0
12.	Earthquake.....	.....0	.....0	.....0	.....0	.....0
13.	Group accident and health.....	.....0	.....0	.....0	.....0	.....0
14.	Credit accident and health (group and individual).....	.....0	.....0	.....0	.....0	.....0
15.	Other accident and health.....	.....0	.....0	.....0	.....0	.....0
16.	Workers' compensation.....	.....0	.....0	.....0	.....0	.....0
17.1	Other liability - occurrence.....	.....0	.....0	.....0	.....0	.....0
17.2	Other liability - claims-made.....	.....0	.....0	.....0	.....0	.....0
17.3	Excess workers' compensation.....	.....0	.....0	.....0	.....0	.....0
18.1	Products liability - occurrence.....	.....0	.....0	.....0	.....0	.....0
18.2	Products liability - claims-made.....	.....0	.....0	.....0	.....0	.....0
19.1, 19.2	Private passenger auto liability.....	545,452	.....0	.....0	.....0	545,452
19.3, 19.4	Commercial auto liability.....	.....0	.....0	.....0	.....0	.....0
21.	Auto physical damage.....	76,772	.....0	.....0	.....0	76,772
22.	Aircraft (all perils).....	.....0	.....0	.....0	.....0	.....0
23.	Fidelity.....	.....0	.....0	.....0	.....0	.....0
24.	Surety.....	.....0	.....0	.....0	.....0	.....0
26.	Burglary and theft.....	.....0	.....0	.....0	.....0	.....0
27.	Boiler and machinery.....	.....0	.....0	.....0	.....0	.....0
28.	Credit.....	.....0	.....0	.....0	.....0	.....0
29.	International.....	.....0	.....0	.....0	.....0	.....0
30.	Warranty.....	.....0	.....0	.....0	.....0	.....0
31.	Reinsurance - nonproportional assumed property.....	.....0	.....0	.....0	.....0	.....0
32.	Reinsurance - nonproportional assumed liability.....	.....0	.....0	.....0	.....0	.....0
33.	Reinsurance - nonproportional assumed financial lines.....	.....0	.....0	.....0	.....0	.....0
34.	Aggregate write-ins for other lines of business.....	.....0	.....0	.....0	.....0	.....0
35.	TOTALS.....	622,224	.....0	.....0	.....0	622,224
36.	Accrued retrospective premiums based on experience.....					.....0
37.	Earned but unbilled premiums.....					.....0
38.	Balance (sum of Lines 35 through 37).....					622,224

DETAILS OF WRITE-INS					
3401.	.....	.....0	.....0	.....0	.....0
3402.	.....	.....0	.....0	.....0	.....0
3403.	.....	.....0	.....0	.....0	.....0
3498.	Summary of remaining write-ins for Line 34 from overflow page	.....0	.....0	.....0	.....0
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above).....	.....0	.....0	.....0	.....0

(a) State here basis of computation used in each case: Daily Pro Rata

West Virginia National Auto Insurance Company  
UNDERWRITING AND INVESTMENT EXHIBIT

PART 1B - PREMIUMS WRITTEN

Line of Business		1  Direct Business (a)	Reinsurance Assumed		Reinsurance Ceded		6  Net Premiums Written (Cols. 1 + 2 + 3 - 4 - 5)
			2  From Affiliates	3  From Non-Affiliates	4  To Affiliates	5  To Non-Affiliates	
1.	Fire.....	.....0	.....0	.....0	.....0	.....0	.....0
2.	Allied lines.....	.....0	.....0	.....0	.....0	.....0	.....0
3.	Farmowners multiple peril.....	.....0	.....0	.....0	.....0	.....0	.....0
4.	Homeowners multiple peril.....	.....0	.....0	.....0	.....0	.....0	.....0
5.	Commercial multiple peril.....	.....0	.....0	.....0	.....0	.....0	.....0
6.	Mortgage guaranty.....	.....0	.....0	.....0	.....0	.....0	.....0
8.	Ocean marine.....	.....0	.....0	.....0	.....0	.....0	.....0
9.	Inland marine.....	.....0	.....0	.....0	.....0	.....0	.....0
10.	Financial guaranty.....	.....0	.....0	.....0	.....0	.....0	.....0
11.1	Medical professional liability - occurrence.....	.....0	.....0	.....0	.....0	.....0	.....0
11.2	Medical professional liability - claims-made.....	.....0	.....0	.....0	.....0	.....0	.....0
12.	Earthquake.....	.....0	.....0	.....0	.....0	.....0	.....0
13.	Group accident and health.....	.....0	.....0	.....0	.....0	.....0	.....0
14.	Credit accident and health (group and individual).....	.....0	.....0	.....0	.....0	.....0	.....0
15.	Other accident and health.....	.....0	.....0	.....0	.....0	.....0	.....0
16.	Workers' compensation.....	.....0	.....0	.....0	.....0	.....0	.....0
17.1	Other liability - occurrence.....	.....0	.....0	.....0	.....0	.....0	.....0
17.2	Other liability - claims-made.....	.....0	.....0	.....0	.....0	.....0	.....0
17.3	Excess workers' compensation.....	.....0	.....0	.....0	.....0	.....0	.....0
18.1	Products liability - occurrence.....	.....0	.....0	.....0	.....0	.....0	.....0
18.2	Products liability - claims-made.....	.....0	.....0	.....0	.....0	.....0	.....0
19.1, 19.2	Private passenger auto liability.....	.....5,508,143	.....0	.....0	.....0	.....2,191,983	.....3,316,160
19.3, 19.4	Commercial auto liability.....	.....0	.....0	.....0	.....0	.....0	.....0
21.	Auto physical damage.....	.....719,111	.....0	.....0	.....0	.....287,672	.....431,439
22.	Aircraft (all perils).....	.....0	.....0	.....0	.....0	.....0	.....0
23.	Fidelity.....	.....0	.....0	.....0	.....0	.....0	.....0
24.	Surety.....	.....0	.....0	.....0	.....0	.....0	.....0
26.	Burglary and theft.....	.....0	.....0	.....0	.....0	.....0	.....0
27.	Boiler and machinery.....	.....0	.....0	.....0	.....0	.....0	.....0
28.	Credit.....	.....0	.....0	.....0	.....0	.....0	.....0
29.	International.....	.....0	.....0	.....0	.....0	.....0	.....0
30.	Warranty.....	.....0	.....0	.....0	.....0	.....0	.....0
31.	Reinsurance - nonproportional assumed property.....	.....XXX.....	.....0	.....0	.....0	.....0	.....0
32.	Reinsurance - nonproportional assumed liability.....	.....XXX.....	.....0	.....0	.....0	.....0	.....0
33.	Reinsurance - nonproportional assumed financial lines.....	.....XXX.....	.....0	.....0	.....0	.....0	.....0
34.	Aggregate write-ins for other lines of business.....	.....0	.....0	.....0	.....0	.....0	.....0
35.	TOTALS.....	.....6,227,254	.....0	.....0	.....0	.....2,479,655	.....3,747,599

DETAILS OF WRITE-INS

3401.	.....	.....0	.....0	.....0	.....0	.....0	.....0
3402.	.....	.....0	.....0	.....0	.....0	.....0	.....0
3403.	.....	.....0	.....0	.....0	.....0	.....0	.....0
3498.	Summary of remaining write-ins for Line 34 from overflow page....	.....0	.....0	.....0	.....0	.....0	.....0
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above).....	.....0	.....0	.....0	.....0	.....0	.....0

(a) Does the company's direct premiums written include premiums recorded on an installment basis? Yes [ ] No [ X ]  
If yes: 1. The amount of such installment premiums \$......0.  
2. Amount at which such installment premiums would have been reported had they been recorded on an annualized basis \$......0.



UNDERWRITING AND INVESTMENT EXHIBIT

PART 2 - LOSSES PAID AND INCURRED

		Losses Paid Less Salvage				5	6	7	8
		1	2	3	4				
Line of Business		Direct Business	Reinsurance Assumed	Reinsurance Recovered	Net Payments (Cols. 1 + 2 - 3)	Net Losses Unpaid Current Year (Part 2A, Col. 8)	Net Losses Unpaid Prior Year	Losses Incurred Current Year (Cols. 4 + 5 - 6)	Percentage of Losses Incurred (Col. 7, Part 2) to Premiums Earned (Col. 4, Part 1)
1.	Fire.....	0	0	0	0	0	0	0	0.0
2.	Allied lines.....	0	0	0	0	0	0	0	0.0
3.	Farmowners multiple peril.....	0	0	0	0	0	0	0	0.0
4.	Homeowners multiple peril.....	0	0	0	0	0	0	0	0.0
5.	Commercial multiple peril.....	0	0	0	0	0	0	0	0.0
6.	Mortgage guaranty.....	0	0	0	0	0	0	0	0.0
8.	Ocean marine.....	0	0	0	0	0	0	0	0.0
9.	Inland marine.....	0	0	0	0	0	0	0	0.0
10.	Financial guaranty.....	0	0	0	0	0	0	0	0.0
11.1	Medical professional liability - occurrence.....	0	0	0	0	0	0	0	0.0
11.2	Medical professional liability - claims-made.....	0	0	0	0	0	0	0	0.0
12.	Earthquake.....	0	0	0	0	0	0	0	0.0
13.	Group accident and health.....	0	0	0	0	0	0	0	0.0
14.	Credit accident and health (group and individual).....	0	0	0	0	0	0	0	0.0
15.	Other accident and health.....	0	0	0	0	0	0	0	0.0
16.	Workers' compensation.....	0	0	0	0	0	0	0	0.0
17.1	Other liability - occurrence.....	0	0	0	0	1,200	1,419	(219)	0.0
17.2	Other liability - claims-made.....	0	0	0	0	0	0	0	0.0
17.3	Excess workers' compensation.....	0	0	0	0	0	0	0	0.0
18.1	Products liability - occurrence.....	0	0	0	0	0	0	0	0.0
18.2	Products liability - claims-made.....	0	0	0	0	0	0	0	0.0
19.1, 19.2	Private passenger auto liability.....	5,431,067	0	2,621,415	2,809,652	1,978,988	2,256,357	2,532,283	72.1
19.3, 19.4	Commercial auto liability.....	0	0	0	0	0	0	0	0.0
21.	Auto physical damage.....	832,300	0	385,625	446,675	23,645	68,382	401,938	65.1
22.	Aircraft (all perils).....	0	0	0	0	0	0	0	0.0
23.	Fidelity.....	0	0	0	0	0	0	0	0.0
24.	Surety.....	0	0	0	0	0	0	0	0.0
26.	Burglary and theft.....	0	0	0	0	0	0	0	0.0
27.	Boiler and machinery.....	0	0	0	0	0	0	0	0.0
28.	Credit.....	0	0	0	0	0	0	0	0.0
29.	International.....	0	0	0	0	0	0	0	0.0
30.	Warranty.....	0	0	0	0	0	0	0	0.0
31.	Reinsurance - nonproportional assumed property.....	XXX	0	0	0	0	0	0	0.0
32.	Reinsurance - nonproportional assumed liability.....	XXX	0	0	0	0	0	0	0.0
33.	Reinsurance - nonproportional assumed financial lines.....	XXX	0	0	0	0	0	0	0.0
34.	Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0.0
35.	TOTALS.....	6,263,367	0	3,007,040	3,256,327	2,003,833	2,326,158	2,934,002	71.0
DETAILS OF WRITE-INS									
3401.	.....	0	0	0	0	0	0	0	0.0
3402.	.....	0	0	0	0	0	0	0	0.0
3403.	.....	0	0	0	0	0	0	0	0.0
3498.	Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	XXX
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0.0

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2A - UNPAID LOSSES AND LOSS ADJUSTMENT EXPENSES

Line of Business		Reported Losses				Incurred But Not Reported			8	9
		1	2	3	4	5	6	7		
		Direct	Reinsurance Assumed	Deduct Reinsurance Recoverable	Net Losses Excluding Incurred but not Reported (Cols. 1 + 2 - 3)	Direct	Reinsurance Assumed	Reinsurance Ceded	Net Losses Unpaid (Cols. 4 + 5 + 6 - 7)	Net Unpaid Loss Adjustment Expenses
1.	Fire.....	0	0	0	0	0	0	0	0	0
2.	Allied lines.....	0	0	0	0	0	0	0	0	0
3.	Farmowners multiple peril.....	0	0	0	0	0	0	0	0	0
4.	Homeowners multiple peril.....	0	0	0	0	0	0	0	0	0
5.	Commercial multiple peril.....	0	0	0	0	0	0	0	0	0
6.	Mortgage guaranty.....	0	0	0	0	0	0	0	0	0
8.	Ocean marine.....	0	0	0	0	0	0	0	0	0
9.	Inland marine.....	0	0	0	0	0	0	0	0	0
10.	Financial guaranty.....	0	0	0	0	0	0	0	0	0
11.1	Medical professional liability - occurrence.....	0	0	0	0	0	0	0	0	0
11.2	Medical professional liability - claims-made.....	0	0	0	0	0	0	0	0	0
12.	Earthquake.....	0	0	0	0	0	0	0	0	0
13.	Group accident and health.....	0	0	0	0	0	0	0	(a).....	0
14.	Credit accident and health (group and individual).....	0	0	0	0	0	0	0	0	0
15.	Other accident and health.....	0	0	0	0	0	0	0	(a).....	0
16.	Workers' compensation.....	0	0	0	0	0	0	0	0	0
17.1	Other liability - occurrence.....	6,000	0	4,800	1,200	0	0	0	1,200	534
17.2	Other liability - claims-made.....	0	0	0	0	0	0	0	0	0
17.3	Excess workers' compensation.....	0	0	0	0	0	0	0	0	0
18.1	Products liability - occurrence.....	0	0	0	0	0	0	0	0	0
18.2	Products liability - claims-made.....	0	0	0	0	0	0	0	0	0
19.1, 19.2	Private passenger auto liability.....	2,521,935	0	1,099,969	1,421,966	971,601	0	414,579	1,978,988	439,733
19.3, 19.4	Commercial auto liability.....	0	0	0	0	0	0	0	0	0
21.	Auto physical damage.....	27,102	0	6,861	20,241	3,765	0	361	23,645	11,474
22.	Aircraft (all perils).....	0	0	0	0	0	0	0	0	0
23.	Fidelity.....	0	0	0	0	0	0	0	0	0
24.	Surety.....	0	0	0	0	0	0	0	0	0
26.	Burglary and theft.....	0	0	0	0	0	0	0	0	0
27.	Boiler and machinery.....	0	0	0	0	0	0	0	0	0
28.	Credit.....	0	0	0	0	0	0	0	0	0
29.	International.....	0	0	0	0	0	0	0	0	0
30.	Warranty.....	0	0	0	0	0	0	0	0	0
31.	Reinsurance - nonproportional assumed property.....	XXX	0	0	0	XXX	0	0	0	0
32.	Reinsurance - nonproportional assumed liability.....	XXX	0	0	0	XXX	0	0	0	0
33.	Reinsurance - nonproportional assumed financial lines.....	XXX	0	0	0	XXX	0	0	0	0
34.	Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0
35.	TOTALS.....	2,555,037	0	1,111,630	1,443,407	975,366	0	414,940	2,003,833	451,741
DETAILS OF WRITE-INS										
3401.	.....	0	0	0	0	0	0	0	0	0
3402.	.....	0	0	0	0	0	0	0	0	0
3403.	.....	0	0	0	0	0	0	0	0	0
3498.	Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0

(a) Including \$.....0 for present value of life indemnity claims.

West Virginia National Auto Insurance Company  
UNDERWRITING AND INVESTMENT EXHIBIT  
PART 3 - EXPENSES

	1	2	3	4
	Loss Adjustment Expenses	Other Underwriting Expenses	Investment Expenses	Total
1. Claim adjustment services:				
1.1 Direct.....	352,271	0	0	352,271
1.2 Reinsurance assumed.....	0	0	0	0
1.3 Reinsurance ceded.....	153,777	0	0	153,777
1.4 Net claim adjustment services (1.1 + 1.2 - 1.3).....	198,494	0	0	198,494
2. Commission and brokerage:				
2.1 Direct, excluding contingent.....	0	916,519	0	916,519
2.2 Reinsurance assumed, excluding contingent.....	0	0	0	0
2.3 Reinsurance ceded, excluding contingent.....	0	743,897	0	743,897
2.4 Contingent - direct.....	0	28,891	0	28,891
2.5 Contingent - reinsurance assumed.....	0	0	0	0
2.6 Contingent - reinsurance ceded.....	0	0	0	0
2.7 Policy and membership fees.....	0	0	0	0
2.8 Net commission and brokerage (2.1 + 2.2 - 2.3 + 2.4 + 2.5 - 2.6 + 2.7).....	0	201,513	0	201,513
3. Allowances to manager and agents.....	0	0	0	0
4. Advertising.....	0	3,830	0	3,830
5. Boards, bureaus and associations.....	0	116,352	0	116,352
6. Surveys and underwriting reports.....	0	100,899	0	100,899
7. Audit of assureds' records.....	0	0	0	0
8. Salary and related items:				
8.1 Salaries.....	352,419	454,359	6,000	812,778
8.2 Payroll taxes.....	28,192	36,354	478	65,024
9. Employee relations and welfare.....	51,842	66,265	875	118,982
10. Insurance.....	4,643	6,144	80	10,867
11. Directors' fees.....	785	1,002	13	1,800
12. Travel and travel items.....	5,862	8,179	0	14,041
13. Rent and rent items.....	37,479	48,127	634	86,240
14. Equipment.....	9,924	12,677	167	22,768
15. Cost or depreciation of EDP equipment and software.....	0	0	0	0
16. Printing and stationery.....	18,244	22,520	302	41,066
17. Postage, telephone and telegraph, exchange and express.....	47,824	61,464	810	110,098
18. Legal and auditing.....	14,846	20,348	261	35,455
19. Totals (Lines 3 to 18).....	572,060	958,520	9,620	1,540,200
20. Taxes, licenses and fees:				
20.1 State and local insurance taxes deducting guaranty association credits of \$.....0.....	0	76,766	0	76,766
20.2 Insurance department licenses and fees.....	7,519	53,636	0	61,155
20.3 Gross guaranty association assessments.....	0	0	0	0
20.4 All other (excluding federal and foreign income and real estate).....	8,232	10,654	0	18,886
20.5 Total taxes, licenses and fees (20.1 + 20.2 + 20.3 + 20.4).....	15,751	141,056	0	156,807
21. Real estate expenses.....	0	0	0	0
22. Real estate taxes.....	0	0	0	0
23. Reimbursements by uninsured plans.....	0	0	0	0
24. Aggregate write-ins for miscellaneous expenses.....	142,300	108,332	22,221	272,853
25. Total expenses incurred.....	928,605	1,409,421	31,841	(a).....2,369,867
26. Less unpaid expenses - current year.....	451,741	246,454	225	698,420
27. Add unpaid expenses - prior year.....	474,946	313,748	221	788,915
28. Amounts receivable relating to uninsured plans, prior year.....	0	0	0	0
29. Amounts receivable relating to uninsured plans, current year.....	0	0	0	0
30. TOTAL EXPENSES PAID (Lines 25 - 26 + 27 - 28 + 29).....	951,810	1,476,715	31,837	2,460,362

DETAILS OF WRITE-INS				
2401. Bank fees.....	16,985	21,696	287	38,968
2402. Outsourced Administrative Services.....	57,711	0	0	57,711
2403. Consulting fees.....	13,362	17,293	21,019	51,674
2498. Summary of remaining write-ins for Line 24 from overflow page.....	54,242	69,343	915	124,500
2499. Totals (Lines 2401 through 2403 plus 2498) (Line 24 above).....	142,300	108,332	22,221	272,853

(a) Includes management fees of \$.....0 to affiliates and \$.....0 to non-affiliates.

EXHIBIT OF NET INVESTMENT INCOME

		1	2
		Collected During Year	Earned During Year
1.	U.S. government bonds.....	(a).....23,163	.....23,334
1.1	Bonds exempt from U.S. tax.....	(a).....54,927	.....52,547
1.2	Other bonds (unaffiliated).....	(a).....52,152	.....50,062
1.3	Bonds of affiliates.....	(a).....0	.....0
2.1	Preferred stocks (unaffiliated).....	(b).....0	.....0
2.11	Preferred stocks of affiliates.....	(b).....0	.....0
2.2	Common stocks (unaffiliated).....	.....1,201	.....692
2.21	Common stocks of affiliates.....	.....0	.....0
3.	Mortgage loans.....	(c).....0	.....0
4.	Real estate.....	(d).....0	.....0
5.	Contract loans.....	.....0	.....0
6.	Cash, cash equivalents and short-term investments.....	(e).....155	.....155
7.	Derivative instruments.....	(f).....0	.....0
8.	Other invested assets.....	.....0	.....0
9.	Aggregate write-ins for investment income.....	.....0	.....0
10.	Total gross investment income.....	.....131,598	.....126,790
11.	Investment expenses.....		(g).....31,841
12.	Investment taxes, licenses and fees, excluding federal income taxes.....		(g).....0
13.	Interest expense.....		(h).....0
14.	Depreciation on real estate and other invested assets.....		(i).....0
15.	Aggregate write-ins for deductions from investment income.....		.....0
16.	Total deductions (Lines 11 through 15).....		.....31,841
17.	Net investment income (Line 10 minus Line 16).....		.....94,949

DETAILS OF WRITE-INS

0901.	.....	.....0	.....0
0902.	.....	.....0	.....0
0903.	.....	.....0	.....0
0998.	Summary of remaining write-ins for Line 9 from overflow page.....	.....0	.....0
0999.	Totals (Lines 0901 through 0903 plus 0998) (Line 9 above).....	.....0	.....0
1501.	.....		.....0
1502.	.....		.....0
1503.	.....		.....0
1598.	Summary of remaining write-ins for Line 15 from overflow page.....		.....0
1599.	Totals (Lines 1501 through 1503 plus 1598) (Line 15 above).....		.....0

- (a) Includes \$.....969 accrual of discount less \$.....64,875 amortization of premium and less \$....1,805 paid for accrued interest on purchases.
- (b) Includes \$.....0 accrual of discount less \$.....0 amortization of premium and less \$.....0 paid for accrued dividends on purchases.
- (c) Includes \$.....0 accrual of discount less \$.....0 amortization of premium and less \$.....0 paid for accrued interest on purchases.
- (d) Includes \$.....0 for company's occupancy of its own buildings; and excludes \$.....0 interest on encumbrances.
- (e) Includes \$.....0 accrual of discount less \$.....0 amortization of premium and less \$.....0 paid for accrued interest on purchases.
- (f) Includes \$.....0 accrual of discount less \$.....0 amortization of premium.
- (g) Includes \$.....0 investment expenses and \$.....0 investment taxes, licenses and fees, excluding federal income taxes, attributable to segregated and Separate Accounts.
- (h) Includes \$.....0 interest on surplus notes and \$.....0 interest on capital notes.
- (i) Includes \$.....0 depreciation on real estate and \$.....0 depreciation on other invested assets.

EXHIBIT OF CAPITAL GAINS (LOSSES)

	1	2	3	4	5
	Realized Gain (Loss) on Sales or Maturity	Other Realized Adjustments	Total Realized Capital Gain (Loss) (Columns 1 + 2)	Change in Unrealized Capital Gain (Loss)	Change in Unrealized Foreign Exchange Capital Gain (Loss)
1.	U.S. government bonds.....570	.....0	.....570	.....0	.....0
1.1	Bonds exempt from U.S. tax.....827	.....0	.....827	.....0	.....0
1.2	Other bonds (unaffiliated).....9,569	.....0	.....9,569	.....0	.....0
1.3	Bonds of affiliates.....0	.....0	.....0	.....0	.....0
2.1	Preferred stocks (unaffiliated).....0	.....0	.....0	.....0	.....0
2.11	Preferred stocks of affiliates.....0	.....0	.....0	.....0	.....0
2.2	Common stocks (unaffiliated).....351	.....0	.....351	.....2,754	.....0
2.21	Common stocks of affiliates.....0	.....0	.....0	.....0	.....0
3.	Mortgage loans.....0	.....0	.....0	.....0	.....0
4.	Real estate.....0	.....0	.....0	.....0	.....0
5.	Contract loans.....0	.....0	.....0	.....0	.....0
6.	Cash, cash equivalents and short-term investments.....0	.....0	.....0	.....0	.....0
7.	Derivative instruments.....0	.....0	.....0	.....0	.....0
8.	Other invested assets.....0	.....0	.....0	.....0	.....0
9.	Aggregate write-ins for capital gains (losses).....0	.....0	.....0	.....0	.....0
10.	Total capital gains (losses).....11,317	.....0	.....11,317	.....2,754	.....0

DETAILS OF WRITE-INS

0901.	.....0	.....0	.....0	.....0	.....0
0902.	.....0	.....0	.....0	.....0	.....0
0903.	.....0	.....0	.....0	.....0	.....0
0998.	Summary of remaining write-ins for Line 9 from overflow page...	.....0	.....0	.....0	.....0
0999.	Totals (Lines 0901 through 0903 plus 0998) (Line 9 above).....	.....0	.....0	.....0	.....0

EXHIBIT OF NONADMITTED ASSETS

	1 Current Year Total Nonadmitted Assets	2 Prior Year Total Nonadmitted Assets	3 Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1. Bonds (Schedule D).....	0	0	0
2. Stocks (Schedule D):			
2.1 Preferred stocks.....	0	0	0
2.2 Common stocks.....	0	0	0
3. Mortgage loans on real estate (Schedule B):			
3.1 First liens.....	0	0	0
3.2 Other than first liens.....	0	0	0
4. Real estate (Schedule A):			
4.1 Properties occupied by the company.....	0	0	0
4.2 Properties held for the production of income.....	0	0	0
4.3 Properties held for sale.....	0	0	0
5. Cash (Schedule E-Part 1), cash equivalents (Schedule E-Part 2) and short-term investments (Schedule DA).....	0	0	0
6. Contract loans.....	0	0	0
7. Derivatives (Schedule DB).....	0	0	0
8. Other invested assets (Schedule BA).....	0	0	0
9. Receivables for securities.....	0	0	0
10. Securities lending reinvested collateral assets (Schedule DL).....	0	0	0
11. Aggregate write-ins for invested assets.....	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11).....	0	0	0
13. Title plants (for Title insurers only).....	0	0	0
14. Investment income due and accrued.....	0	0	0
15. Premiums and considerations:			
15.1 Uncollected premiums and agents' balances in the course of collection.....	0	0	0
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due.....	0	0	0
15.3 Accrued retrospective premiums and contracts subject to redetermination.....	0	0	0
16. Reinsurance:			
16.1 Amounts recoverable from reinsurers.....	0	0	0
16.2 Funds held by or deposited with reinsured companies.....	0	0	0
16.3 Other amounts receivable under reinsurance contracts.....	0	0	0
17. Amounts receivable relating to uninsured plans.....	0	0	0
18.1 Current federal and foreign income tax recoverable and interest thereon.....	0	0	0
18.2 Net deferred tax asset.....	508,593	277,255	(231,338)
19. Guaranty funds receivable or on deposit.....	0	0	0
20. Electronic data processing equipment and software.....	0	0	0
21. Furniture and equipment, including health care delivery assets.....	869	6,082	5,213
22. Net adjustment in assets and liabilities due to foreign exchange rates.....	0	0	0
23. Receivables from parent, subsidiaries and affiliates.....	0	0	0
24. Health care and other amounts receivable.....	0	0	0
25. Aggregate write-ins for other-than-invested assets.....	27,124	30,840	3,716
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 through 25).....	536,586	314,177	(222,409)
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....	0	0	0
28. TOTALS (Lines 26 and 27).....	536,586	314,177	(222,409)

DETAILS OF WRITE-INS

1101. ....	0	0	0
1102. ....	0	0	0
1103. ....	0	0	0
1198. Summary of remaining write-ins for Line 11 from overflow page.....	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above).....	0	0	0
2501. Prepaid Expenses.....	24,791	26,173	1,382
2502. Lease Trade-in Allowance.....	2,333	4,667	2,334
2503. ....	0	0	0
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0	0
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above).....	27,124	30,840	3,716

NOTES TO FINANCIAL STATEMENTS

Note 1 – Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

	SSAP #	F/S Page	F/S Line #	2016	2015
NET INCOME					
(1) West Virginia National Auto Insurance Company state basis (Page 4, Line 20, Columns 1 & 2)	XXX	XXX	XXX	\$ (737,209)	\$ (1,153,052)
(2) State Prescribed Practices that increase/decrease NAIC SAP				0	0
(3) State Permitted Practices that increase/decrease NAIC SAP				0	0
(4) NAIC SAP (1 – 2 – 3 = 4)	XXX	XXX	XXX	\$ (737,209)	\$ (1,153,052)
SURPLUS					
(5) West Virginia National Auto Insurance Company state basis (Page 3, line 37, Columns 1 & 2)	XXX	XXX	XXX	\$ 2,686,259	\$ 3,525,845
(6) State Prescribed Practices that increase/decrease NAIC SAP				0	0
(7) State Permitted Practices that increase/decrease NAIC SAP				0	0
(8) NAIC SAP (5 – 6 – 7 = 8)	XXX	XXX	XXX	\$ 2,686,259	\$ 3,525,845

B. Use of Estimates in the Preparation of the Financial Statement

The preparation of financial statements in conformity with Statutory Accounting Principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities. It also requires disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the period. Actual results could differ from those estimates.

C. Accounting Policy

Premiums are earned over the terms of the related policies and reinsurance contracts. Unearned premiums are established to cover the unexpired portion of premiums written. Such reserves are computed by daily pro rata methods for direct and ceded business.

Expenses incurred in connection with acquiring new insurance business, including acquisition costs such as sales commissions, are charged to operations as incurred. Expenses incurred are reduced by ceding allowances received or receivable.

Net investment income earned consists primarily of interest and dividends less investment related expenses. Interest is recognized on an accrual basis. Net realized gains (losses) are recognized on a specific identification basis when securities are sold, redeemed or otherwise disposed.

In addition, the Company uses the following accounting policies:

- Short-term investments are stated at amortized cost using the interest method. The Company does not have any non-investment grade short-term investments.
- Bonds not backed by other loans are stated at amortized cost using the interest method.
- Common stocks, other than investments in stocks of subsidiaries and affiliates, are stated at market value.
- The Company does not have any investments in preferred stocks.
- The Company does not have any investments in mortgage loans.
- Loan-backed securities are stated at amortized cost. The retrospective adjustment method is used to value all loan-backed securities.
- The Company does not have any investments in subsidiaries, controlled or affiliated companies.
- The Company does not have any investments in joint ventures, partnerships or limited liability companies.
- The Company does not have any investments in derivatives.
- The Company does not utilize anticipated investment income as a factor in the premium deficiency calculation.
- Unpaid losses and loss adjustment expenses include an amount determined from individual case estimates and loss reports and an amount, based upon past experience, for losses incurred but not reported. Such liabilities are necessarily based on assumptions and estimates and while management believes the amount is adequate, the ultimate liabilities may be in excess of or less than the amount provided. The methods for making such estimates and for establishing the resulting liabilities are continually reviewed and any adjustments are reflected in the period determined.
- The Company has not changed its capitalization policy from the prior year.
- The Company does not have any pharmaceutical rebate receivables.

D. Going Concern

Not applicable.

Note 2 – Accounting Changes and Corrections of Errors

Not applicable.

Note 3 – Business Combinations and Goodwill

A. Statutory Purchase Method

NOTES TO FINANCIAL STATEMENTS

Not applicable.

B. Statutory Merger

Not applicable.

C. Impairment Loss

Not applicable.

Note 4 – Discontinued Operations

A. Discontinued Operation Disposed of or Classified as Held for Sale

(1) List of Discontinued Operations Disposed of or Classified as Held for Sale

Discontinued Operation Identifier	Description of Discontinued Operation
0	

(2)

(3) Loss Recognized on Discontinued Operations

Discontinued Operation Identifier	Amount for Reporting Period	Cumulative Amount Since Classified as Held for Sale
0	\$ 0	\$ 0

(4) Carrying Amount and Fair Value of Discontinued Operations and the Effect on Assets, Liabilities, Surplus and Income

a. Carrying Amount of Discontinued Operations

Discontinued Operation Identifier	Carrying Amount Immediately Prior to Classification as Held for Sale	Current Fair Value Less Costs to Sell
0	\$ 0	\$ 0

b. Effect of Discontinued Operations on Assets, Liabilities, Surplus and Income

	Discontinued Operation Identifier	Line Number	Line Description	Amount Attributable to Discontinued Operations
1. Assets				
	0			\$ 0
2. Liabilities				
	0			\$ 0
3. Surplus				
	0			\$ 0
4. Income				
	0			\$ 0

B. Change in Plan of Sale of Discontinued Operation

Not applicable.

C. Nature of any Significant Continuing Involvement with Discontinued Operations After Disposal

Not applicable.

D. Equity Interest Retained in the Discontinued Operation After Disposal

Not applicable.

Note 5 – Investments

A. Mortgage Loans, including Mezzanine Real Estate Loans

Not applicable.

(1) The maximum and minimum lending rates for mortgage loans during 2016 were:

(2) The maximum percentage of any one loan to the value of security at the time of the loan, exclusive of insured or guaranteed or purchase money mortgage was \_\_\_\_%.

(3) Taxes, assessments and any amounts advanced and not included in the mortgage loan total

Current Year	Prior Year
\$ 0	\$ 0

(4) Age Analysis of Mortgage Loans:

			Residential		Commercial			
		Farm	Insured	All Other	Insured	All Other	Mezzanine	Total
a.	Current Year							
	1. Recorded Investment (All)							

NOTES TO FINANCIAL STATEMENTS

	(a)	Current	\$	0	\$	0	\$	0	\$	0	\$	0	\$	0	\$	0
	(b)	30-59 Days Past Due		0		0		0		0		0		0		0
	(c)	60-89 Days Past Due		0		0		0		0		0		0		0
	(d)	90-179 Days Past Due		0		0		0		0		0		0		0
	(e)	180+ Days Past Due		0		0		0		0		0		0		0
	2.	Accruing Interest 90-179 Days Past Due														
	(a)	Recorded Investment	\$	0	\$	0	\$	0	\$	0	\$	0	\$	0	\$	0
	(b)	Interest Accrued		0		0		0		0		0		0		0
	3.	Accruing Interest 180+ Days Past Due														
	(a)	Recorded Investment	\$	0	\$	0	\$	0	\$	0	\$	0	\$	0	\$	0
	(b)	Interest Accrued		0		0		0		0		0		0		0
	4.	Interest Reduced														
	(a)	Recorded Investment	\$	0	\$	0	\$	0	\$	0	\$	0	\$	0	\$	0
	(b)	Number of Loans		0		0		0		0		0		0		0
	(c)	Percent Reduced		0.000%		0.000%		0.000%		0.000%		0.000%		0.000%		0.000%
b.	Prior Year															
	1.	Recorded Investment (All)														
	(a)	Current	\$	0	\$	0	\$	0	\$	0	\$	0	\$	0	\$	0
	(b)	30-59 Days Past Due		0		0		0		0		0		0		0
	(c)	60-89 Days Past Due		0		0		0		0		0		0		0
	(d)	90-179 Days Past Due		0		0		0		0		0		0		0
	(e)	180+ Days Past Due		0		0		0		0		0		0		0
	2.	Accruing Interest 90-179 Days Past Due														
	(a)	Recorded Investment	\$	0	\$	0	\$	0	\$	0	\$	0	\$	0	\$	0
	(b)	Interest Accrued		0		0		0		0		0		0		0
	3.	Accruing Interest 180+ Days Past Due														
	(a)	Recorded Investment	\$	0	\$	0	\$	0	\$	0	\$	0	\$	0	\$	0
	(b)	Interest Accrued		0		0		0		0		0		0		0
	4.	Interest Reduced														
	(a)	Recorded Investment	\$	0	\$	0	\$	0	\$	0	\$	0	\$	0	\$	0
	(b)	Number of Loans		0		0		0		0		0		0		0
	(c)	Percent Reduced		0.000%		0.000%		0.000%		0.000%		0.000%		0.000%		0.000%

(5) Investment in Impaired Loans With or Without Allowance for Credit Losses:

			Residential		Commercial			
		Farm	Insured	All Other	Insured	All Other	Mezzanine	Total
a.	Current Year							
	1.	With Allowance for Credit Losses	\$	0	\$	0	\$	0
	2.	No Allowance for Credit Losses		0		0		0
b.	Prior Year							
	1.	With Allowance for Credit Losses	\$	0	\$	0	\$	0
	2.	No Allowance for Credit Losses		0		0		0

(6) Investment in Impaired Loans – Average Recorded Investment, Interest Income Recognized, Recorded Investment on Nonaccrual Status and Amount of Interest Income Recognized Using a Cash-Basis Method of Accounting:

			Residential		Commercial			
		Farm	Insured	All Other	Insured	All Other	Mezzanine	Total
a.	Current Year							
	1.	Average Recorded Investment	\$	0	\$	0	\$	0
	2.	Interest Income Recognized		0		0		0
	3.	Recorded Investments on Nonaccrual Status		0		0		0
	4.	Amount of Interest Income Recognized Using a Cash-Basis Method of Accounting		0		0		0
b.	Prior Year							
	1.	Average Recorded Investment	\$	0	\$	0	\$	0



NOTES TO FINANCIAL STATEMENTS

	2.	Interest Income Recognized	0	0	0	0	0	0
	3.	Recorded Investments on Nonaccrual Status	0	0	0	0	0	0
	4.	Amount of Interest Income Recognized Using a Cash-Basis Method of Accounting	0	0	0	0	0	0

			Current Year	Prior Year
(7)	Allowance for Credit Losses:			
	a.	Balance at beginning of period	\$ 0	\$ 0
	b.	Additions charged to operations	0	0
	c.	Direct write-downs charged against the allowances	0	0
	d.	Recoveries of amounts previously charged off	0	0
	e.	Balance at end of period	\$ 0	\$ 0

			Current Year
(8)	Mortgage Loans Derecognized as a Result of Foreclosure:		
	a.	Aggregate amount of mortgage loans derecognized	\$ 0
	b.	Real estate collateral recognized	\$ 0
	c.	Other collateral recognized	\$ 0
	d.	Receivables recognized from a government guarantee of the foreclosed mortgage loan	\$ 0

(9)

B. Debt Restructuring

Not applicable.

		Current Year	Prior Year
(1)	The total recorded investment in restructured loans, as of year-end	\$ 0	\$ 0
(2)	The realized capital losses related to these loans	\$ 0	\$ 0
(3)	Total contractual commitments to extend credit to debtors owing receivables whose terms have been modified in troubled debt restructurings	\$ 0	\$ 0

(4)

C. Reverse Mortgages

- (1) Not applicable.
- (2) Not applicable.
- (3) At December 31, 2016, the actuarial reserve of \$0 reduced the asset value of the group of reverse mortgages.
- (4) West Virginia National Auto Insurance Company recorded an unrealized loss \$0 as a result of the re-estimates of the cash flows.

D. Loan-Backed Securities

- (1) Not applicable.

		1	2	3
(2)		Amortized Cost Basis Before Other-than-Temporary Impairment	Other-than-Temporary Impairment Recognized in Loss	Fair Value 1 – 2
OTTI recognized 1 <sup>st</sup> Quarter				
	a.	Intent to sell	\$ 0	\$ 0
	b.	Inability or lack of intent to retain the investment in the security for a period of time sufficient to recover the amortized cost basis	0	0
	c.	Total 1 <sup>st</sup> Quarter	\$ 0	\$ 0
OTTI recognized 2 <sup>nd</sup> Quarter				
	d.	Intent to sell	\$ 0	\$ 0
	e.	Inability or lack of intent to retain the investment in the security for a period of time sufficient to recover the amortized cost basis	0	0
	f.	Total 2 <sup>nd</sup> Quarter	\$ 0	\$ 0
OTTI recognized 3 <sup>rd</sup> Quarter				
	g.	Intent to sell	\$ 0	\$ 0
	h.	Inability or lack of intent to retain the investment in the security for a period of time sufficient to recover the amortized cost basis	0	0
	i.	Total 3 <sup>rd</sup> Quarter	\$ 0	\$ 0
OTTI recognized 4 <sup>th</sup> Quarter				
	j.	Intent to sell	\$ 0	\$ 0
	k.	Inability or lack of intent to retain the investment in the security for a period of time sufficient to recover the amortized cost basis	0	0

NOTES TO FINANCIAL STATEMENTS

l.	Total 4 <sup>th</sup> Quarter	0	\$ 0	0
m.	Annual aggregate total	XXX	\$ 0	XXX

(3) Recognized OTTI securities

CUSIP	Book/Adjusted Carrying Value Amortized Cost Before Current Period OTTI	Present Value of Projected Cash Flows	Recognized Other-Than-Temporary Impairment	Amortized Cost After Other-Than-Temporary Impairment	Fair Value at Time of OTTI	Date of Financial Statement Where Reported
	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	
Total			\$ 0			

(4) All impaired securities (fair value is less than cost or amortized cost) for which an other-than-temporary impairment has not been recognized in earnings as a realized loss (including securities with a recognized other-than-temporary impairment for non-interest related declines when a non-recognized interest related impairment remains):						
a.	The aggregate amount of unrealized losses:	1.	Less than 12 Months	\$	0	
		2.	12 Months or Longer	\$	0	
b.	The aggregate related fair value of securities with unrealized losses:	1.	Less than 12 Months	\$	0	
		2.	12 Months or Longer	\$	0	

(5) Not applicable.

E. Repurchase Agreements and/or Securities Lending Transactions

(1) Not applicable.

(2) Not applicable.

(3) Collateral Received

Aggregate Amount Collateral Received			Fair Value
a.	1.	Repurchase Agreement	
	(a)	Open	\$ 0
	(b)	30 Days or Less	0
	(c)	31 to 60 Days	0
	(d)	61 to 90 Days	0
	(e)	Greater Than 90 Days	0
	(f)	Sub-Total	\$ 0
	(g)	Securities Received	0
	(h)	Total Collateral Received	\$ 0
	2.	Securities Lending	
	(a)	Open	\$ 0
	(b)	30 Days or Less	0
	(c)	31 to 60 Days	0
	(d)	61 to 90 Days	0
	(e)	Greater Than 90 Days	0
	(f)	Sub-Total	\$ 0
	(g)	Securities Received	0
	(h)	Total Collateral Received	\$ 0
	3.	Dollar Repurchase Agreement	
	(a)	Open	\$ 0
	(b)	30 Days or Less	0
	(c)	31 to 60 Days	0
	(d)	61 to 90 Days	0
	(e)	Greater Than 90 Days	0
	(f)	Sub-Total	\$ 0
	(g)	Securities Received	0
	(h)	Total Collateral Received	\$ 0
	b.	The fair value of that collateral and of the portion of that collateral that it has sold or repledged	

c.

(4) Not applicable.

(5) Collateral Reinvestment

a.	Aggregate Amount Collateral Reinvested		Amortized Cost		Fair Value	
	1.	Repurchase Agreement				
	(a)	Open	\$	0	\$	0
	(b)	30 Days or Less		0		0
	(c)	31 to 60 Days		0		0
	(d)	61 to 90 Days		0		0
	(e)	91 to 120 Days		0		0
	(f)	121 to 180 Days		0		0
	(g)	181 to 365 Days		0		0
	(h)	1 to 2 Years		0		0
	(i)	2 to 3 Years		0		0
	(j)	Greater Than 3 Years		0		0
	(k)	Sub-Total	\$	0	\$	0
	(l)	Securities Received		0		0
	(m)	Total Collateral Reinvested	\$	0	\$	0

NOTES TO FINANCIAL STATEMENTS

2.	Securities Lending					
	(a)	Open	\$	0	\$	0
	(b)	30 Days or Less		0		0
	(c)	31 to 60 Days		0		0
	(d)	61 to 90 Days		0		0
	(e)	91 to 120 Days		0		0
	(f)	121 to 180 Days		0		0
	(g)	181 to 365 Days		0		0
	(h)	1 to 2 Years		0		0
	(i)	2 to 3 Years		0		0
	(j)	Greater Than 3 Years		0		0
	(k)	Sub-Total	\$	0	\$	0
	(l)	Securities Received		0		0
(m)	Total Collateral Reinvested	\$	0	\$	0	
3.	Dollar Repurchase Agreement					
	(a)	Open	\$	0	\$	0
	(b)	30 Days or Less		0		0
	(c)	31 to 60 Days		0		0
	(d)	61 to 90 Days		0		0
	(e)	91 to 120 Days		0		0
	(f)	121 to 180 Days		0		0
	(g)	181 to 365 Days		0		0
	(h)	1 to 2 Years		0		0
	(i)	2 to 3 Years		0		0
	(j)	Greater Than 3 Years		0		0
	(k)	Sub-Total	\$	0	\$	0
	(l)	Securities Received		0		0
(m)	Total Collateral Reinvested	\$	0	\$	0	

b. Not applicable.

(6) Not applicable.

(7) Collateral for Securities Lending transactions that extend beyond one year from the reporting date.

Description of Collateral	Amount
	\$ 0
Total Collateral extending beyond one year of the reporting date	\$ 0

F. Real Estate

(1) Not applicable.

(2) Not applicable.

(3) Not applicable.

(4) Not applicable.

(5) Not applicable.

G. Investments in Low-Income Housing Trade Credits (LIHTC)

(1) Not applicable.

(2) Not applicable.

(3) Not applicable.

(4) Not applicable.

(5) Not applicable.

(6) Not applicable.

(7) Not applicable.

H. Restricted Assets

(1) Restricted Assets (Including Pledged)

Restricted Asset Category	Gross (Admitted & Nonadmitted) Restricted							Current Year			
	Current Year									Percentage	
	1	2	3	4	5	6	7	8	9	10	11
	Total General Account (G/A)	G/A Supporting Protected Cell Account Activity (a)	Total Protected Cell Account Restricted Assets	Protected Cell Account Assets Supporting G/A Activity (b)	Total (1 plus 3)	Total From Prior Year	Increase/ (Decrease) (5 minus 6)	Total Nonadmitted Restricted	Total Admitted Restricted (5 minus 8)	Gross (Admitted & Nonadmitted ) Restricted to Total Assets (c)	Admitted Restricted to Total Admitted Assets (d)
a. Subject to contractual obligation for which liability is not shown	0	0	0	0	0	0	0	0	0	0.000	0.000

NOTES TO FINANCIAL STATEMENTS

b. Collateral held under security lending arrangements	0	0	0	0	0	0	0	0	0	0.000	0.000
c. Subject to repurchase agreements	0	0	0	0	0	0	0	0	0	0.000	0.000
d. Subject to reverse repurchase agreements	0	0	0	0	0	0	0	0	0	0.000	0.000
e. Subject to dollar repurchase agreements	0	0	0	0	0	0	0	0	0	0.000	0.000
f. Subject to dollar reverse repurchase agreements	0	0	0	0	0	0	0	0	0	0.000	0.000
g. Placed under option contracts	0	0	0	0	0	0	0	0	0	0.000	0.000
h. Letter stock or securities restricted as to sale – excluding FHLB capital stock	0	0	0	0	0	0	0	0	0	0.000	0.000
i. FHLB capital stock	0	0	0	0	0	0	0	0	0	0.000	0.000
j. On deposit with states	519,800	0	0	0	519,800	520,296	(496)	0	519,800	7.503	8.132
k. On deposit with other regulatory bodies	0	0	0	0	0	0	0	0	0	0.000	0.000
l. Pledged as collateral to FHLB (including assets backing funding agreements)	0	0	0	0	0	0	0	0	0	0.000	0.000
m. Pledged as collateral not captured in other categories	0	0	0	0	0	0	0	0	0	0.000	0.000
n. Other restricted assets	0	0	0	0	0	0	0	0	0	0.000	0.000
o. Total Restricted Assets	\$ 519,800	\$ 0	\$ 0	\$ 0	\$ 519,800	\$ 520,296	\$ (496)	0	\$ 519,800	7.503	8.132%

- (a) Subset of column 1
- (b) Subset of column 3
- (c) Column 5 divided by Asset Page, Column 1, Line 28
- (d) Column 9 divided by Asset Page, Column 3, Line 28

(2) Detail of Assets Pledged as Collateral Not Captured in Other Categories (Contacts that Share Similar Characteristics, Such as Reinsurance and Derivatives, are Reported in the Aggregate)

Description of Assets	Gross (Admitted & Nonadmitted) Restricted							8	Percentage	
	Current Year					6	7		9	10
	1	2	3	4	5					
	Total General Account (G/A)	G/A Supporting Protected Cell Account Activity (a)	Total Protected Cell Account Restricted Assets	Protected Cell Account Assets Supporting G/A Activity (b)	Total (1 plus 3)	Total From Prior Year	Increase/ (Decrease) (5 minus 6)	Total Current Year Admitted Restricted	Gross (Admitted & Nonadmitted) Restricted to Total Assets	Admitted Restricted to Total Admitted Assets
	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	0.000	0.000
Total (c)	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	0.000	0.000

- (a) Subset of column 1
- (b) Subset of column 3
- (c) Total Line for Columns 1 through 7 should equal 5H(1)m Columns 1 through 7 respectively and Total Line for Columns 8 through 10 should equal 5H(1)m Columns 9 through 11 respectively.

(3) Detail of Other Restricted Assets (Contracts that Share Similar Characteristics, such as Reinsurance and Derivatives, are Reported in the Aggregate)

Description of Assets	Gross (Admitted & Nonadmitted) Restricted							8	Percentage	
	Current Year					6	7		9	10
	1	2	3	4	5					
	Total General Account (G/A)	G/A Supporting Protected Cell Account Activity (a)	Total Protected Cell Account Restricted Assets	Protected Cell Account Assets Supporting G/A Activity (b)	Total (1 plus 3)	Total From Prior Year	Increase/ (Decrease) (5 minus 6)	Total Current Year Admitted Restricted	Gross (Admitted & Nonadmitted) Restricted to Total Assets	Admitted Restricted to Total Admitted Assets
	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	0.000	0.000
Total (c)	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	0.000	0.000

- (a) Subset of column 1
- (b) Subset of column 3
- (c) Total Line for Columns 1 through 7 should equal 5H(1)n Columns 1 through 7 respectively and Total Line for Columns 8 through 10 should equal 5H(1)n Columns 9 through 11 respectively.

(4) Collateral Received and Reflected as Assets Within the Reporting Entity's Financial Statements

Collateral Assets	1	2	3	4
	Book/Adjusted Carrying Value (BACV)	Fair Value	% of BACV to Total Assets (Admitted and Nonadmitted)*	% of BACV to Total Admitted Assets**
a. Cash	\$ 0	\$ 0	0.000%	0.000%

NOTES TO FINANCIAL STATEMENTS

b. Schedule D, Part 1	0	0	0.000%	0.000%
c. Schedule D, Part 2, Sec. 1	0	0	0.000%	0.000%
d. Schedule D, Part 2, Sec. 2	0	0	0.000%	0.000%
e. Schedule B	0	0	0.000%	0.000%
f. Schedule A	0	0	0.000%	0.000%
g. Schedule BA, Part 1	0	0	0.000%	0.000%
h. Schedule DL, Part 1	0	0	0.000%	0.000%
i. Other	0	0	0.000%	0.000%
j. Total Collateral Assets (a+b+c+d+e+f+g+i)	\$ 0	\$ 0	0.000%	0.000%

\*. Column 1 divided by Asset Page, Line 26 (Column 1)

\*\* Column 1 divided by Asset Page, Line 26 (Column 3)

	1	2
	Amount	% of Liability to Total Liabilities
k. Recognized Obligation to Return Collateral Asset	\$ 0	0.000%

\* Column 1 divided by Liability Page, Line 26 (Column 1)

I. Working Capital Finance Investments

(1) Aggregate Working Capital Finance Investments (WCFI) Book/Adjusted Carrying Value by NAIC Designation:

	Gross Asset CY	Non-admitted Asset CY	Net Admitted Asset CY
a. WCFI Designation 1	\$ 0	\$ 0	\$ 0
b. WCFI Designation 2	0	0	0
c. WCFI Designation 3	0	0	0
d. WCFI Designation 4	0	0	0
e. WCFI Designation 5	0	0	0
f. WCFI Designation 6	0	0	0
g. Total	\$ 0	\$ 0	\$ 0

(2) Aggregate Maturity Distribution on the Underlying Working Capital Finance Programs

	Book/Adjusted Carrying Value
a. Up to 180 Days	\$ 0
b. 181 to 365 Days	0
c. Total	\$ 0

J. Offsetting and Netting of Assets and Liabilities

(1) Assets	Gross Amount Recognized	Amount Offset	Net Amount Presented on Financial Statements
	\$ 0	\$ 0	\$ 0
(2) Liabilities			
	\$ 0	\$ 0	\$ 0

K. Structured Notes

CUSIP Identification	Actual Cost	Fair Value	Book/Adjusted Carrying Value	Mortgage- Referenced Security (YES/NO)
	\$ 0	\$ 0	\$ 0	
XXX	\$ 0	\$ 0	\$ 0	XXX

L. 5\* Securities

	Number of 5* Securities		Aggregate BACV		Aggregate Fair Value	
Investment	Current Year	Prior Year	Current Year	Prior Year	Current Year	Prior Year
(1) Bonds – AC	0	0	\$ 0	\$ 0	\$ 0	\$ 0
(2) Bonds – FV	0	0	\$ 0	\$ 0	\$ 0	\$ 0
(3) LB & SS – AC	0	0	\$ 0	\$ 0	\$ 0	\$ 0
(4) LB & SS – FV	0	0	\$ 0	\$ 0	\$ 0	\$ 0
(5) Preferred Stock – AC	0	0	\$ 0	\$ 0	\$ 0	\$ 0
(6) Preferred Stock – FV	0	0	\$ 0	\$ 0	\$ 0	\$ 0
(7) Total (1+2+3+4+5+6)	0	0	\$ 0	\$ 0	\$ 0	\$ 0

AC – Amortized Cost                      FV – Fair Value

Note 6 – Joint Ventures, Partnerships and Limited Liability Companies

- A. Not applicable.
- B. Not applicable.

Note 7 – Investment Income

- A. Not applicable.
- B. Not applicable.

Note 8 – Derivative Instruments

- A. Not applicable.

NOTES TO FINANCIAL STATEMENTS

- B. Not applicable.
- C. Not applicable.
- D. Not applicable.
- E. Not applicable.
- F. Not applicable.
- (1) Not applicable.
- (2) Not applicable.

Note 9 – Income Taxes

A. Deferred Tax Assets/(Liabilities)

1. Components of Net Deferred Tax Asset/(Liability)

	2016			2015			Change		
	1 Ordinary	2 Capital	3 (Col 1+2) Total	4 Ordinary	5 Capital	6 (Col 4+5) Total	7 (Col 1-4) Ordinary	8 (Col 2-5) Capital	9 (Col 7+8) Total
a. Gross deferred tax assets	\$ 917,445	\$ 0	\$ 917,445	\$ 800,167	\$ 0	\$ 800,167	\$ 117,278	\$ 0	\$ 117,278
b. Statutory valuation allowance adjustment	0	0	0	0	0	0	0	0	0
c. Adjusted gross deferred tax assets (1a-1b)	917,445	0	917,445	800,167	0	800,167	117,278	0	117,278
d. Deferred tax assets nonadmitted	508,593	0	508,593	277,255	0	277,255	231,338	0	231,338
e. Subtotal net admitted deferred tax asset (1c-1d)	408,852	0	408,852	522,912	0	522,912	(114,060)	0	(114,060)
f. Deferred tax liabilities	0	0	0	0	0	0	0	0	0
g. Net admitted deferred tax assets/(net deferred tax liability) (1e-1f)	\$ 408,852	\$ 0	\$ 408,852	\$ 522,912	\$ 0	\$ 522,912	\$ (114,060)	\$ 0	\$ (114,060)

2. Admission Calculation Components

	2016			2015			Change		
	1 Ordinary	2 Capital	3 (Col 1+2) Total	4 Ordinary	5 Capital	6 (Col 4+5) Total	7 (Col 1-4) Ordinary	8 (Col 2-5) Capital	9 (Col 7+8) Total
a. Federal income taxes paid in prior years recoverable through loss carrybacks	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
b. Adjusted gross deferred tax assets expected to be realized (excluding the amount of deferred tax assets from 2(a) above) after application of the threshold limitation. (The lesser of 2(b)1 and 2(b)2 below:	0	0	0	0	0	0	0	0	0
Adjusted gross deferred tax assets expected to be realized following the balance sheet date	0	0	0	0	0	0	0	0	0
Adjusted gross deferred tax assets allowed per limitation threshold			0			0			0
c. Adjusted gross deferred tax assets (excluding the amount of deferred tax assets from 2(a) and 2(b) above)	0	0	0	0	0	0	0	0	0

NOTES TO FINANCIAL STATEMENTS

offset by gross deferred tax liabilities										
d. Deferred tax assets admitted as the result of application of SSAP 101. Total (2(a)+2(b)+2(c))	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0

3. Other Admissibility Criteria

		2016	2015
a.	Ratio percentage used to determine recovery period and threshold limitation amount	0.000%	0.000%
b.	Amount of adjusted capital and surplus used to determine recovery period and threshold limitation in 2(b)2 above	\$ 0	\$ 0

4. Impact of Tax Planning Strategies

(a) Determination of adjusted gross deferred tax assets and net admitted deferred tax assets, by tax character as a percentage.

	12/31/2016		12/31/2015		Change	
	1 Ordinary	2 Capital	3 Ordinary	4 Capital	5 (Col. 1-3) Ordinary	6 (Col. 2-4) Capital
1. Adjusted gross DTAs amount from Note 9A1(c)	\$ 917,445	\$ 0	\$ 800,167	\$ 0	\$ 117,278	\$ 0
2. Percentage of adjusted gross DTAs by tax character attributable to the impact of tax planning strategies	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%
3. Net Admitted Adjusted Gross DTAs amount from Note 9A1(e)	\$ 408,852	\$ 0	\$ 522,912	\$ 0	\$ (114,060)	\$ 0
4. Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact of tax planning strategies	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%

(b) Does the company's tax planning strategies include the use of reinsurance? NO

B. Deferred Tax Liabilities Not Recognized

C. Current and Deferred Income Taxes

1. Current Income Tax

	1 2016	2 2015	3 (Col 1-2) Change
a. Federal	\$ 0	\$ 0	\$ 0
b. Foreign	0	0	0
c. Subtotal	\$ 0	\$ 0	\$ 0
d. Federal income tax on net capital gains	0	0	0
e. Utilization of capital loss carry-forwards	0	0	0
f. Other	0	0	0
g. Federal and Foreign income taxes incurred	\$ 0	\$ 0	\$ 0

2. Deferred Tax Assets

	1 2016	2 2015	3 (Col 1-2) Change
a. Ordinary:			
1. Discounting of unpaid losses	\$ 20,689	\$ 30,508	\$ (9,819)
2. Unearned premium reserve	42,311	68,351	(26,040)
3. Policyholder reserves	0	0	0
4. Investments	(431)	1,172	(1,603)
5. Deferred acquisition costs	0	0	0
6. Policyholder dividends accrual	0	0	0
7. Fixed assets	3,650	23,021	(19,371)
8. Compensation and benefits accrual	0	0	0
9. Pension accrual	0	0	0
10. Receivables - nonadmitted	0	0	0
11. Net operating loss carry-forward	851,226	677,115	174,111
12. Tax credit carry-forward	0	0	0
13. Other (including items <5% of total ordinary tax	0	0	0

NOTES TO FINANCIAL STATEMENTS

assets)						
99. Subtotal	\$	917,445	\$	800,167	\$	117,278
b. Statutory valuation allowance adjustment		0		0		0
c. Nonadmitted		508,593		277,255		231,338
d. Admitted ordinary deferred tax assets (2a99-2b-2c)	\$	408,852	\$	522,912	\$	(114,060)
e. Capital:						
1. Investments	\$	0	\$	0	\$	0
2. Net capital loss carry-forward		0		0		0
3. Real estate		0		0		0
4. Other (including items <5% of total capital tax assets)		0		0		0
99. Subtotal	\$	0	\$	0	\$	0
f. Statutory valuation allowance adjustment		0		0		0
g. Nonadmitted		0		0		0
h. Admitted capital deferred tax assets (2e99-2f-2g)		0		0		0
i. Admitted deferred tax assets (2d+2h)	\$	408,852	\$	522,912	\$	(114,060)

3. Deferred Tax Liabilities

	1	2	3
	2016	2015	(Col 1–2) Change
a. Ordinary:			
1. Investments	\$ 0	\$ 0	\$ 0
2. Fixed assets	0	0	0
3. Deferred and uncollected premium	0	0	0
4. Policyholder reserves	0	0	0
5. Other (including items <5% of total ordinary tax liabilities)	0	0	0
99. Subtotal	\$ 0	\$ 0	\$ 0
b. Capital:			
1. Investments	\$ 0	\$ 0	\$ 0
2. Real estate	0	0	0
3. Other (including items <5% of total capital tax liabilities)	0	0	0
99. Subtotal	0	0	0
c. Deferred tax liabilities (3a99+3b99)	\$ 0	\$ 0	\$ 0

4. Net Deferred Tax Assets (2i – 3c)	\$	408,852	\$	522,912	\$	(114,060)
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D. Reconciliation of Federal Income Tax Rate to Actual Effective Rate Among the more significant book to tax adjustments were the following:

	Amount	Effective Tax Rate (%)
Permanent Differences:		
Provision computed at statutory rate	\$	%
Proration of tax exempt investment income		%
Tax exempt income deduction		%
Dividends received deduction		%
Disallowed travel and entertainment		%
Other permanent differences		%
Temporary Differences:		
Total ordinary DTAs	\$	%
Total ordinary DTLs		%
Total capital DTAs		%
Total capital DTLs		%
Other:		
Statutory valuation allowance adjustment	\$	%
Accrual adjustment – prior year		%
Other		%
Totals	\$	%
Federal and foreign income taxes incurred		%
Realized capital gains (losses) tax		%
Change in net deferred income taxes		%
Total statutory income taxes	\$	%

E. Operating Loss and Tax Credit Carryforwards and Protective Tax Deposits

At December 31, 2016, the Company did not have any unused operating loss carryforwards available to offset against future taxable income.

The following is income tax expense for 2016 and 2015 that is available for recoupment in the event of future net losses:

Year	Amount
2016	\$
2015	\$

The Company did not have any protective tax deposits under Section 6603 of the Internal Revenue Code.



NOTES TO FINANCIAL STATEMENTS

F. Consolidated Federal Income Tax Return

The Company's federal income tax return is consolidated with the following entities:

Not applicable.

2. The method of allocation among companies is subject to a written agreement, approved by the Board of Directors, whereby allocation is made primarily on a separate return basis with current credit for any net operating losses or other items utilized in the consolidated tax return. Intercompany tax balances are settled monthly.

G. Federal or Foreign Federal Income Tax Loss Contingencies

The Company does not have any tax loss contingencies for which it is reasonably possible that the total liability will significantly increase within twelve months of the reporting date.

Note 10 – Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties

A. The Company is a wholly owned subsidiary of WVA National Company, L.L.C. (Parent), a limited liability company domiciled in the state of West Virginia.

B. The Company paid the Parent for computer processing services of \$124,545 and \$180,805 in 2016 and 2015. The Company declared and paid shareholder dividends of \$0 in 2016 and 2015, respectively.

C. Not applicable.

D. At December 31, 2016 and 2015, \$10,223 and \$13,670 was due to the Parent under the terms of the intercompany computer processing services contract. These amounts were paid in the following January of each year.

E. Not applicable.

F. The Company has an agreement, approved by the West Virginia Department of Insurance, whereby the Parent provides computer processing services. In 2016, the total expense amount under this agreement was \$124,545, based upon direct written premiums processed.

The Company also has a cost sharing agreement, approved by the West Virginia Department of Insurance, whereby the Parent reimburses the Company for its share of the insurance expense. The total insurance expense amount reimbursed under this agreement was \$1,216 related to 2015.

G. All outstanding shares of the Company are owned by the Parent.

H. Not applicable.

I. Not applicable.

J. Not applicable.

K. Not applicable.

L. Not applicable.

M. All SCA Investments Not applicable.

(1) Balance Sheet Value (Admitted and Nonadmitted) All SCAs (Except 8bi Entities)

SCA Entity	Percentage of SCA Ownership	Gross Amount	Admitted Amount	Nonadmitted Amount
a. SSAP No. 97 8a Entities				
	0.000 %	0	0	0
Total SSAP No. 97 8a Entities	XXX	\$ 0	\$ 0	\$ 0
b. SSAP No. 97 8b(ii) Entities				
	0.000 %	0	0	0
Total SSAP No. 97 8b(ii) Entities	XXX	\$ 0	\$ 0	\$ 0
c. SSAP No. 97 8b(iii) Entities				
	0.000 %	0	0	0
Total SSAP No. 97 8b(iii) Entities	XXX	\$ 0	\$ 0	\$ 0
d. SSAP No. 97 8b(iv) Entities				
	0.000 %	0	0	0
Total SSAP No. 97 8b(iv) Entities	XXX	\$ 0	\$ 0	\$ 0
e. Total SSAP No. 97 8b Entities (exception 8b(i) entities) (b + c + d)	XXX	\$ 0	\$ 0	\$ 0
f. Aggregate Total (a + e)	XXX	\$ 0	\$ 0	\$ 0

(2) NAIC Filing Response Information

SCA Entity (Should be the same entities as shown in M(1) above)	Type of NAIC Filing*	Date of Filing to the NAIC	NAIC Valuation Amount	NAIC Response Received Y/N	NAIC Disallowed Entities Valuation Method Resubmission Required Y/N	Code**
a. SSAP No. 97 8a Entities			0			
Total SSAP No. 97 8a Entities	XXX	XXX	\$ 0	XXX	XXX	XXX

NOTES TO FINANCIAL STATEMENTS

b. SSAP No. 97 8b(ii) Entities						
			0			
Total SSAP No. 97 8b(ii) Entities	XXX	XXX	\$ 0	XXX	XXX	XXX
c. SSAP No. 97 8b(iii) Entities						
			0			
Total SSAP No. 97 8b(iii) Entities	XXX	XXX	\$ 0	XXX	XXX	XXX
d. SSAP No. 97 8b(iv) Entities						
			0			
Total SSAP No. 97 8b(iv) Entities	XXX	XXX	\$ 0	XXX	XXX	XXX
e. Total SSAP No. 97 8b Entities (exception 8b(i) entities) (b + c + d)	XXX	XXX	\$ 0	XXX	XXX	XXX
f. Aggregate Total (a + e)	XXX	XXX	\$ 0	XXX	XXX	XXX

\* S1 – Sub-1, S2 – Sub-2 or RDF – Resubmission of Disallowed Filing

\*\* I – Immaterial or M – Material

N. Investment in Insurance SCAs Not applicable.

(1) Not applicable.

	Monetary Effect on NAIC SAP		Amount of Investment	
SCA Entity (Investments in Insurance SCA Entities)	Net Income Increase (Decrease)	Surplus Increase (Decrease)	Per Audited Statutory Equity	If the Insurance SCA Had Completed Statutory Financial Statements*
	\$ 0	\$ 0	\$ 0	\$ 0

\* Per AP&P Manual (without permitted or prescribed practices)

(3) Not applicable.

Note 11 – Debt

A. Not applicable.

B. Not applicable.

FHLB (Federal Home Loan Bank) Agreements

(1)

(2) FHLB Capital Stock

a. Aggregate Totals

1. Current Year

	1 Total 2 + 3	2 General Account	3 Protected Cell Accounts
(a) Membership Stock – Class A	\$ 0	\$ 0	\$ 0
(b) Membership Stock – Class B	0	0	0
(c) Activity Stock	0	0	0
(d) Excess Stock	0	0	0
(e) Aggregate Total (a+b+c+d)	\$ 0	\$ 0	\$ 0
(f) Actual or estimated borrowing capacity as determined by the insurer	\$ 0	XXX	XXX

2. Prior Year

	1 Total 2 + 3	2 General Account	3 Protected Cell Accounts
(a) Membership Stock – Class A	\$ 0	\$ 0	\$ 0
(b) Membership Stock – Class B	0	0	0
(c) Activity Stock	0	0	0
(d) Excess Stock	0	0	0
(e) Aggregate Total (a+b+c+d)	\$ 0	\$ 0	\$ 0
(f) Actual or estimated borrowing capacity as determined by the insurer	\$ 0	XXX	XXX

b. Membership Stock (Class A and B) Eligible and Not Eligible for Redemption

Membership Stock	1 Current Year Total (2+3+4+5+6)	2 Not Eligible for Redemption	Eligible for Redemption			
			3 Less than 6 Months	4 6 Months to Less Than 1 Year	5 1 to Less Than 3 Years	6 3 to 5 Years
1. Class A	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
2. Class B	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0

(3) Collateral Pledged to FHLB

NOTES TO FINANCIAL STATEMENTS

a. Amount Pledged as of Reporting Date

	1	2	3
	Fair Value	Carrying Value	Aggregate Total Borrowing
1. Current Year Total General and Protected Cell Total Collateral Pledged (Lines 2+3)	\$ 0	\$ 0	\$ 0
2. Current Year General Account Total Collateral Pledged	\$ 0	\$ 0	\$ 0
3. Current Year Protected Cell Total Collateral Pledged	\$ 0	\$ 0	\$ 0
4. Prior Year Total General and Protected Cell Total Collateral Pledged	\$ 0	\$ 0	\$ 0

b. Maximum Amount Pledged During Reporting Period

	1	2	3
	Fair Value	Carrying Value	Amount Borrowed at Time of Maximum Collateral
1. Current Year Total General and Protected Cell Total Collateral Pledged (Lines 2+3)	\$ 0	\$ 0	\$ 0
2. Current Year General Account Total Collateral Pledged	\$ 0	\$ 0	\$ 0
3. Current Year Protected Cell Total Collateral Pledged	\$ 0	\$ 0	\$ 0
4. Prior Year Total General and Protected Cell Total Collateral Pledged	\$ 0	\$ 0	\$ 0

(4) Borrowing from FHLB

a. Amount as of the Reporting Date

1. Current Year

	1	2	3	4
	Total 2 + 3	General Account	Protected Cell Account	Funding Agreements Reserves Established
(a) Debt	\$ 0	\$ 0	\$ 0	XXX
(b) Funding Agreements	0	0	0	\$ 0
(c) Other	0	0	0	XXX
(d) Aggregate Total (a+b+c)	\$ 0	\$ 0	\$ 0	\$ 0

2. Prior Year

	1	2	3	4
	Total 2 + 3	General Account	Protected Cell Account	Funding Agreements Reserves Established
(a) Debt	\$ 0	\$ 0	\$ 0	XXX
(b) Funding Agreements	0	0	0	\$ 0
(c) Other	0	0	0	XXX
(d) Aggregate Total (a+b+c)	\$ 0	\$ 0	\$ 0	\$ 0

b. Maximum Amount During Reporting Period (Current Year)

	1	2	3
	Total 2 + 3	General Account	Protected Cell Accounts
1. Debt	\$ 0	\$ 0	\$ 0
2. Funding Agreements	0	0	0
3. Other	0	0	0
4. Aggregate Total (Lines 1+2+3)	\$ 0	\$ 0	\$ 0

c. FHLB – Prepayment Obligations

	Does the Company have Prepayment Obligations under the Following Arrangements (YES/NO)
1. Debt	
2. Funding Agreements	
3. Other	

Note 12 – Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans

A. Defined Benefit Plan Not applicable.

(1)	Change in Benefit Obligation	Overfunded		Underfunded	
a.	Pension Benefits	2016	2015	2016	2015
1.	Benefit obligation at beginning of year	\$ 0	\$ 0	\$ 0	\$ 0
2.	Service cost	0	0	0	0
3.	Interest cost	0	0	0	0
4.	Continuation by plan participants	0	0	0	0
5.	Actuarial gain (loss)	0	0	0	0
6.	Foreign currency exchange rate changes	0	0	0	0

NOTES TO FINANCIAL STATEMENTS

	7.	Benefits paid	0	0	0	0
	8.	Plan amendments	0	0	0	0
	9.	Business combinations, divestitures, curtailments, settlements and special termination benefits	0	0	0	0
	10.	Benefit obligation at end of year	\$ 0	\$ 0	\$ 0	\$ 0
			Overfunded		Underfunded	
b.	Postretirement Benefits		2016	2015	2016	2015
	1.	Benefit obligation at beginning of year	\$ 0	\$ 0	\$ 0	\$ 0
	2.	Service cost	0	0	0	0
	3.	Interest cost	0	0	0	0
	4.	Continuation by plan participants	0	0	0	0
	5.	Actuarial gain (loss)	0	0	0	0
	6.	Foreign currency exchange rate changes	0	0	0	0
	7.	Benefits paid	0	0	0	0
	8.	Plan amendments	0	0	0	0
	9.	Business combinations, divestitures, curtailments, settlements and special termination benefits	0	0	0	0
	10.	Benefit obligation at end of year	\$ 0	\$ 0	\$ 0	\$ 0
			Overfunded		Underfunded	
c.	Special or Contractual Benefits per SSAP No. 11		2016	2015	2016	2015
	1.	Benefit obligation at beginning of year	\$ 0	\$ 0	\$ 0	\$ 0
	2.	Service cost	0	0	0	0
	3.	Interest cost	0	0	0	0
	4.	Continuation by plan participants	0	0	0	0
	5.	Actuarial gain (loss)	0	0	0	0
	6.	Foreign currency exchange rate changes	0	0	0	0
	7.	Benefits paid	0	0	0	0
	8.	Plan amendments	0	0	0	0
	9.	Business combinations, divestitures, curtailments, settlements and special termination benefits	0	0	0	0
	10.	Benefit obligation at end of year	\$ 0	\$ 0	\$ 0	\$ 0

(2)

Change in plan assets		Pension Benefits		Postretirement Benefits		Special or Contractual Benefits per SSAP No. 11	
		2016	2015	2016	2015	2016	2015
a.	Fair value of plan assets at beginning of year	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
b.	Actual return on plan assets	0	0	0	0	0	0
c.	Foreign currency exchange rate changes	0	0	0	0	0	0
d.	Reporting entity contribution	0	0	0	0	0	0
e.	Plan participants' contributions	0	0	0	0	0	0
f.	Benefits paid	0	0	0	0	0	0
g.	Business combinations, divestitures and settlements	0	0	0	0	0	0
h.	Fair value of plan assets at end of year	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0

(3)

Funded status		Pension Benefits		Postretirement Benefits	
Overfunded:		2016	2015	2016	2015
a.	Assets (nonadmitted)				
	1. Prepaid benefit costs	\$ 0	\$ 0	\$ 0	\$ 0
	2. Overfunded plans assets	0	0	0	0
	3. Total assets (nonadmitted)	\$ 0	\$ 0	\$ 0	\$ 0
Underfunded:					
b.	Liabilities recognized				
	1. Accrued benefits costs	\$ 0	\$ 0	\$ 0	\$ 0
	2. Liability for pension benefits	0	0	0	0
	3. Total liabilities recognized	\$ 0	\$ 0	\$ 0	\$ 0

NOTES TO FINANCIAL STATEMENTS

c.

Unrecognized liabilities

\$

0

\$

0

\$

0

\$

0

(4)

Components of net periodic benefit cost		Pension Benefits		Postretirement Benefits		Special or Contractual Benefits per SSAP No. 11	
		2016	2015	2016	2015	2016	2015
a.	Service cost	\$	0	\$	0	\$	0
b.	Interest cost		0		0		0
c.	Expected return on plan assets		0		0		0
d.	Transition asset or obligation		0		0		0
e.	Gains and losses		0		0		0
f.	Prior service cost or credit		0		0		0
g.	Gain or loss recognized due to a settlements curtailment		0		0		0
h.	Total net periodic benefit cost	\$	0	\$	0	\$	0

(5)

Amounts in unassigned funds (surplus) recognized as components of net periodic benefit cost		Pension Benefits		Postretirement Benefits	
		2016	2015	2016	2015
a.	Items not yet recognized as a component of net periodic cost – prior year	\$	0	\$	0
b.	Net transition asset or obligation recognized		0		0
c.	Net prior service cost or credit arising during the period		0		0
d.	Net prior service cost or credit recognized		0		0
e.	Net gain and loss arising during the period		0		0
f.	Net gain and loss recognized		0		0
g.	Items not yet recognized as a component of net periodic cost – current year	\$	0	\$	0

(6)

Amounts in unassigned funds (surplus) expected to be recognized in the next fiscal year as components of net periodic benefit cost		Pension Benefits		Postretirement Benefits	
		2016	2015	2016	2015
a.	Net transition asset or obligations	\$	0	\$	0
b.	Net prior service cost or credit		0		0
c.	Net recognized gains and losses	\$	0	\$	0

(7)

Amounts in unassigned funds (surplus) that have not yet been recognized as components of net periodic benefit cost		Pension Benefits		Postretirement Benefits	
		2016	2015	2016	2015
a.	Net transition asset or obligations	\$	0	\$	0
b.	Net prior service cost or credit		0		0
c.	Net recognized gains and losses	\$	0	\$	0

(8)

Weighted-average assumptions used to determine net periodic benefit cost as of December 31		2016	2015
a.	Weighted-average discount rate	0.000%	0.000%
b.	Expected long-term rate of return on plan assets	0.000%	0.000%
c.	Rate of compensation increase	0.000%	0.000%
Weighted-average assumptions used to determine projected benefit obligations as of December 31			
d.	Weighted-average discount rate	0.000%	0.000%
e.	Rate of compensation increase	0.000%	0.000%

(9)

The amount of the accumulated benefit obligation for defined benefit pension plans was \$\_\_\_\_\_ for the current year and \$\_\_\_\_\_ for the prior year.

(10)

(11)

Assumed health care cost trend rates have a significant effect on the amounts reported for the health care plans. A one-percentage point change in assumed health care cost trend rates would have the following effects:		1 Percentage Point Increase	1 Percentage Point Decrease
a.	Effect on total of service and interest cost components	\$	0
b.	Effect on postretirement benefit obligation	\$	0

(12)

The following estimated future payments, which reflect expected future service, as appropriate, are expected to be paid in the year indicated:

	Year(s)	Amount
--	---------	--------

NOTES TO FINANCIAL STATEMENTS

a.	2017	\$	0
b.	2018	\$	0
c.	2019	\$	0
d.	2020	\$	0
e.	2021	\$	0
f.	2022 through 20__	\$	0

(13) Not applicable.

(14) Not applicable.

(15) Not applicable.

(16) Not applicable.

(17) Not applicable.

(18) Not applicable.

(19) Not applicable.

(20) Not applicable.

(21) Not applicable.

B. Investment Policies and Strategies

Not applicable.

C. Fair Value of Plan Assets

Not applicable.

(1) Fair Value Measurements of Plans Assets at Reporting Date

Description for each class of plan assets	(Level 1)	(Level 2)	(Level 3)	Total
	\$ 0	\$ 0	\$ 0	\$ 0
Total Plan Assets	\$ 0	\$ 0	\$ 0	\$ 0

(2) Fair Value Measurements in Level 3 of the Fair Value Hierarchy

Description for each class of plan assets	Beginning Balance at 1/1/2016	Transfers into Level 3	Transfers out of Level 3	Return on Assets Still Held	Return on Assets Sold	Purchases	Issuances	Sales	Settlements	Ending Balance at 12/31/2016
	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Total Plan Assets	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0

(3)

D. Basis Used to Determine Expected Long-Term Rate-of-Return

Not applicable.

E. Defined Contribution Plans

The Company sponsors a Savings Incentive Match Plan for Employees (SIMPLE plan). The Company matches each employee's contributions to the plan up to 3% of the employee's salary. The Company's contributions to the plan were \$24,187 and \$29,176 in 2016 and 2015.

F. Multiemployer Plans

Not applicable.

G. Consolidated/Holding Company Plans

Not applicable.

H. Postemployment Benefits and Compensated Absences

Not applicable.

I. Impact of Medicare Modernization Act on Postretirement Benefits (INT 04-17)

Not applicable.

Note 13 – Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations

(1) The Company has authorized 40 shares of Class A common stock having a par value of \$50,000 per share and 10 shares of Class B common stock having a par value of \$100 per share. At December 31, 2013, 20 shares of the Class A common stock and 10 shares of the Class B common stock are issued and outstanding. All of the Company’s authorized and unissued common stock is available for general corporate purposes. The Company has no preferred stock authorized, issued or outstanding.

(2) Not applicable.

NOTES TO FINANCIAL STATEMENTS

- (3) Under the insurance regulations of West Virginia, the maximum amount of dividends which a company can pay to shareholders is limited to the lesser of 10% of policyholders’ surplus at December 31, 2016 or the net income less realized capital gains for the year ended December 31, 2016.
- (4) The Company paid \$0 in ordinary dividends in 2016 and 2015, respectively. The Company did not pay any extraordinary dividends in 2016 and 2015.
- (5) Dividends on common stock are paid as declared by the Board of Directors of the Company. For 2017, the maximum dividend payout to shareholders that may be made without prior approval of the West Virginia Insurance Department is \$0.
- (6) Not applicable.
- (7) Not applicable.
- (8) Not applicable.
- (9) Not applicable.
- (10) The portion of unassigned funds (surplus) represented or reduced by unrealized gains and losses is: \$0

(11) The reporting entity issued the following surplus debentures or similar obligations: Not applicable.

Date Issued	Interest Rate	Par Value (Face Amount of Notes)	Carrying Value of Note*	Principal and/or Interest Paid Current Year	Total Principal and/or Interest Paid	Unapproved Principal and/or Interest	Date of Maturity
	0.000 %	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	
Total	XXX	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	XXX

\* Total should agree with Page 3, Line 33.

(12) The impact of any restatement due to prior quasi-reorganizations is as follows: Not applicable.

Description (Year)	Change in Surplus	Change in Gross Paid in and Contributed Surplus
	\$ 0	\$ 0

(13) The effective dates of all quasi-reorganizations in the prior 10 years are: . Not applicable.

Note 14 – Liabilities, Contingencies and Assessments

A. Contingent Commitments

- (1) Total SSAP No. 97, Investments in Subsidiary, Controlled, and Affiliated Entities, A Replacement of SSAP No. 88, and SSAP No. 48, Joint Ventures, Partnerships and Limited Liability Company contingent liabilities: \$0.
- (2) Detail of other contingent commitments

Nature and Circumstances of Guarantee and Key Attributes, Including Date and Duration of Agreement	Liability Recognition of Guarantee, (Including Amount Recognized at Inception. If no Initial Recognition, Document Exception Allowed Under SSAP No. 5R)	Ultimate Financial Statement Impact if Action under the Guarantee is Required	Maximum Potential Amount of Future Payments (Undiscounted) the Guarantor could be Required to make under the Guarantee. If unable to Develop an Estimate, this Should be Specifically Noted	Current Status of Payment or Performance Risk of Guarantee. Also Provide Additional Discussion as Warranted
	\$ 0		\$ 0	
Total	\$ 0	XXX	\$ 0	XXX

a.	Aggregate maximum potential of future payments of all guarantees (undiscounted) the guarantor could be required to make under guarantees. (Should equal the total of column 4 for (2) above.)	\$ 0
b.	Current liability recognized in F/S	
1.	Noncontingent liabilities	\$ 0
2.	Contingent liabilities	\$ 0
c.	Ultimate financial statement impact if action under the guarantee is required	
1.	Investments in SCA	\$ 0
2.	Joint Venture	0
3.	Dividends to stockholders (capital contribution)	0
4.	Expense	0
5.	Other	0
6.	Total (should equal (3)a)	\$ 0

B. Assessments

(1) Where Amount is Unknown. Not applicable.

Where Amount is Known. Not applicable.

a.	Assets recognized from paid and accrued premium tax offsets and policy surcharges prior year –end	\$ 0
b.	Decreases current year:	\$ 0
c.	Increases current year:	\$ 0
d.	Assets recognized from paid and accrued premium tax offsets and policy surcharges current year-end	\$ 0

NOTES TO FINANCIAL STATEMENTS

C. Gain Contingencies

Not applicable.

D. Claims Related Extra Contractual Obligation and Bad Faith Losses Stemming from Lawsuits

West Virginia National Auto Insurance Company paid the following amounts in the reporting period to settle claims related extra contractual obligations or bad faith claims stemming from lawsuits:

	Direct
Claims related ECO and bad faith losses paid during the reporting period	\$ 33,000

Number of claims where amounts were paid to settle claims related extra contractual obligations or bad faith claims resulting from lawsuits during the reporting period:

(a) 0-25 Claims	(b) 26-50 Claims	(c) 51-100 Claims	(d) 101-500 Claims	(e) More than 500 Claims
X				

Indicate whether claim count information is disclosed per claim or per claimant:

(f) Per Claim [ X ] (g) Per Claimant [ ]

E. Product Warranties

(1) Not applicable.

(2) Reconciliation of aggregate product warranty liability

a.	Product warranty liability beginning balance	\$ 0
b.	Reductions for payments made under the warranty	0
c.	Liability accrual for product warranties issued during the current period	0
d.	Change in liability accrual for product warranties issued in previous period	0
e.	Product warranty liability ending balance	\$ 0

F. Joint and Several Liabilities

Not applicable.

G. All Other Contingencies

Various lawsuits against the Company have arisen in the course of the Company's business. Contingent liabilities arising from litigation, income taxes and other matters are not considered material in relation to the financial position of the Company. The Company has no asset that it considers to be impaired.

Note 15 – Leases

A. Lessee Operating Lease

(1) The Company leases its office facilities and equipment under various operating lease agreements that expire through 2016. Rental expense for 2016 and 2015 was \$96,244 and \$77,250, respectively.

(2)

a.	At January 1, 2017 the minimum aggregate rental commitments are as follows:		
		Year Ending December 31	Operating Leases
1.	2017	\$	96,244
2.	2018	\$	35,494
3.	2019	\$	3,797
4.	2020	\$	3,797
5.	2021	\$	0
6.	Total	\$	0

(3) Not applicable.

B. Revenue, Net Income or Assets with Respect to Leases

(1) For operating leases:

a. Not applicable.

b. Not applicable.

c.	Future minimum lease payment receivables under noncancelable leasing arrangements as of December 31 are as follows:		
		Year Ending December 31	Operating Leases
1.	2017	\$	0
2.	2018	\$	0
3.	2019	\$	0
4.	2020	\$	0
5.	2021	\$	0
6.	Total	\$	0

(d) Not applicable.



NOTES TO FINANCIAL STATEMENTS

(2) For leveraged leases:

(a) Not applicable.

(b) Not applicable.

		2016	2015
1.	Income from leveraged leases before income tax including investment tax credit	\$ 0	\$ 0
2.	Less current income tax	0	0
3.	Net income from leveraged leases	\$ 0	\$ 0

(c) The components of the investment in leveraged leases at December 31, 2016 and 2015 were as shown below: Not applicable.

		2016	2015
1.	Lease contracts receivable (net of principal and interest on non-recourse financing)	\$ 0	\$ 0
2.	Estimated residual value of leased assets	0	0
3.	Unearned and deferred income	0	0
4.	Investment in leveraged leases	0	0
5.	Deferred income taxes related to leveraged leases	0	0
6.	Net investment in leveraged leases	\$ 0	\$ 0

Note 16 – Information About Financial Instruments with Off-Balance Sheet Risk and Financial Instruments with Concentrations of Credit Risk

1. The table below summarizes the face amount of the Company's financial instruments with off-balance sheet risk: Not applicable.

		Assets		Liabilities	
		2016	2015	2016	2015
a.	Swaps	\$ 0	\$ 0	\$ 0	\$ 0
b.	Futures	0	0	0	0
c.	Options	0	0	0	0
d.	Total	\$ 0	\$ 0	\$ 0	\$ 0

2. Not applicable.

3. Not applicable.

4. Not applicable.

Note 17 – Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

A. Transfers of Receivables Reported as Sales

(1) Not applicable.

(2) Not applicable.

B. Transfer and Servicing of Financial Assets

(1) Not applicable.

(2) Not applicable.

(3) Not applicable.

(4) Not applicable.

(5) Not applicable.

(6) Not applicable.

(7) Not applicable.

C. Wash Sales

(1) Not applicable.

(2) The details by NAIC designation 3 or below, or unrated of securities sold during the year ended December 31, 2016 and reacquired within 30 days of the sale date are:

Description	NAIC Designation	Number of Transactions	Book Value of Securities Sold	Cost of Securities Repurchased	Gain/(Loss)
		0	\$ 0	\$ 0	\$ 0

Note 18 – Gain or Loss to the Reporting Entity from Uninsured Plans and the Portion of Partially Insured Plans

Not applicable.

A. ASO Plans

The gain from operations from Administrative Services Only (ASO) uninsured plans and he uninsured portion of partially insured plans was as follows during 2016:

		ASO Uninsured Plans	Uninsured Portion of Partially Insured Plans	Total ASO
a.	Net reimbursement for administrative expenses (including	\$ 0	\$ 0	\$ 0

NOTES TO FINANCIAL STATEMENTS

	administrative fees) in excess of actual expenses			
b.	Total net other income or expenses (including interest paid to or receive from plans)	0	0	0
c.	Net gain or (loss) from operations	0	0	0
d.	Total claim payment volume	\$ 0	\$ 0	\$ 0

B. ASC Plans

The gain from operations from Administrative Services Contract (ASC) uninsured plans and he uninsured portion of partially insured plans was as follows during 2016:

		ASC Uninsured Plans	Uninsured Portion of Partially Insured Plans	Total ASC
a.	Gross reimbursement for medical cost incurred	\$ 0	\$ 0	\$ 0
b.	Gross administrative fees accrued	0	0	0
c.	Other income or expenses (including interest paid to or received from plans)	0	0	0
d.	Gross expenses incurred (claims and administrative)	0	0	0
e.	Total net gain or loss from operations	\$ 0	\$ 0	\$ 0

C. Medicare or Similarly Structured Cost Based Reimbursement Contract

- (1) Not applicable.
- (2) Not applicable.
- (3) Not applicable.
- (4) Not applicable.

Note 19 – Direct Premium Written/Produced by Managing General Agents/Third Party Administrators

Not applicable.

Name and Address of Managing General Agent or Third Party Administrator	FEIN Number	Exclusive Contract	Types of Business Written	Types of Authority Granted	Total Direct Premiums Written/Produced By
					\$ 0
Total	XXX	XXX	XXX	XXX	\$ 0

Note 20 – Fair Value Measurements

A.

(1) Fair Value Measurements at Reporting Date

Assets at Fair Value	Level 1	Level 2	Level 3	Total
	\$ 0	\$ 0	\$ 0	\$ 0
Total	\$ 0	\$ 0	\$ 0	\$ 0

Liabilities at Fair Value	Level 1	Level 2	Level 3	Total
	\$ 0	\$ 0	\$ 0	\$ 0
Total	\$ 0	\$ 0	\$ 0	\$ 0

(2) Fair Value Measurements in (Level 3) of the Fair Value Hierarchy

	Beginning Balance at 1/1/2016	Transfers Into Level 3	Transfers Out of Level 3	Total Gains and (Losses) Included in Net Income	Total Gains and (Losses) Included in Surplus	Purchases	Issuances	Sales	Settlements	Ending Balance at 12/31/2016
a. Assets										
	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
Total	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0

	Beginning Balance at 1/1/2016	Transfers Into Level 3	Transfers Out of Level 3	Total Gains and (Losses) Included in Net Income	Total Gains and (Losses) Included in Surplus	Purchases	Issuances	Sales	Settlements	Ending Balance at 12/31/2016
b. Liabilities										
	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
Total	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0

- (3) Not applicable.
- (4) Not applicable.
- (5) Not applicable.

B. Not applicable.

C.

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Not Practicable (Carrying Value)
Bonds	\$ 5,128,428	\$ 5,128,076	\$ 0	\$ 5,128,076	\$ 0	\$ 0

D. Not Practicable to Estimate Fair Value

Type of Class or Financial Instrument	Carrying Value	Effective	Maturity Date	Explanation
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NOTES TO FINANCIAL STATEMENTS

		Interest Rate		
	\$	0	0.000 %	

Note 21 – Other Items

A. Unusual or Infrequent Items

Not applicable.

B. Troubled Debt Restructuring Debtors

Not applicable.

C. Other Disclosures

Not applicable.

D. Business Interruption Insurance Recoveries

Not applicable.

E. State Transferable and Non-Transferable Tax Credits

Not applicable.

(1) Carrying Value of Transferable and Non-Transferable State Tax Credits Gross of any Related Tax Liabilities and Total Unused Transferable and Non-Transferable State Tax Credits by State and in Total

Description of State Transferable and Non-Transferable Tax Credits	State	Carrying Value	Unused Amount
		\$ 0	\$ 0
Total		\$ 0	\$ 0

(2) Method of Estimating Utilization of Remaining Transferable and Non-Transferable State Tax Credits

(3) Impairment Loss

(4) State Tax Credits Admitted and Nonadmitted

		Total Admitted	Total Nonadmitted
a.	Transferable	\$ 0	\$ 0
b.	Non-Transferable	\$ 0	\$ 0

F. Subprime Mortgage Related Risk Exposure

Not applicable.

(1)

(2) Direct Exposure Through Investments in Subprime Mortgage Loans

		Book/Adjusted Carrying Value (Excluding Interest)	Fair Value	Value of Land and Buildings	Other-Than-Temporary Impairment Losses Recognized	Default Rate
a.	Mortgages in the process of foreclosure	\$ 0	\$ 0	\$ 0	\$ 0	0.000%
b.	Mortgages in good standing	0	0	0	0	0.000%
c.	Mortgages with restored terms	0	0	0	0	0.000%
d.	Total	\$ 0	\$ 0	\$ 0	\$ 0	XXX

(3) Direct Exposure Through Other Investments

		Actual Cost	Book/Adjusted Carrying Value (Excluding Interest)	Fair Value	Other-Than-Temporary Impairment Losses Recognized
a.	Residential mortgage backed securities	\$ 0	\$ 0	\$ 0	\$ 0
b.	Commercial mortgage backed securities	0	0	0	0
c.	Collateralized debt obligations	0	0	0	0
d.	Structured securities	0	0	0	0
e.	Equity investments in SCAs*	0	0	0	0
f.	Other assets	0	0	0	0
g.	Total	\$ 0	\$ 0	\$ 0	\$ 0

\* These investments comprise 0.000% of the company's invested assets.

(4) Underwriting Exposure to Subprime Mortgage Risk Through Mortgage Guaranty or Financial Guaranty Insurance Coverage

		Losses Paid in the Current Year	Losses Incurred in the Current Year	Case Reserves at end of Current Period	IBNR Reserves at End of Current Period
a.	Mortgage guaranty coverage	\$ 0	\$ 0	\$ 0	\$ 0
b.	Financial guaranty coverage	0	0	0	0
c.	Other lines (specify):	0	0	0	0
d.	Total	\$ 0	\$ 0	\$ 0	\$ 0

NOTES TO FINANCIAL STATEMENTS

G. Insurance-Linked Securities (ILS) Contracts

Not applicable.

Management of Risk Related to:		Number of Outstanding ILS Contracts	Aggregate Maximum Proceeds
(1)	Directly-Written Insurance Risks		
a.	ILS Contracts as Issuer	0	\$ 0
b.	ILS Contracts as Ceding Insurer	0	\$ 0
c.	ILS Contracts as Counterparty	0	\$ 0
(2)	Assumed Insurance Risks		
a.	ILS Contracts as Issuer	0	\$ 0
b.	ILS Contracts as Ceding Insurer	0	\$ 0
c.	ILS Contracts as Counterparty	0	\$ 0

Note 22 – Events Subsequent

Not applicable.

A.	Did the reporting entity write accident and health insurance premium that is subject to Section 9010 of the Federal Affordable Care Act (YES/NO)?	Yes [ ]	No [ ]
B.	ACA fee assessment payable for the upcoming year	\$ 0	\$ 0
C.	ACA fee assessment paid	0	0
D.	Premium written subject to ACA 9010 assessment	0	0
E.	Total adjusted capital before surplus adjustment (Five-Year Historical Line 28)	0	
F.	Total adjusted capital (Five-Year Historical Line 28 minus 22B above)	0	
G.	Authorized control level (Five-Year Historical Line 29)	\$ 0	
H.	Would reporting the ACA assessment as of December 31, 2016 have triggered an RBC action level (YES/NO)?	Yes [ ]	No [ ]

Note 23 – Reinsurance

A. Unsecured Reinsurance Recoverables

At December 31, 2016, the Company’s unsecured reinsurance balances (including ceded case and IBNR reserves) in any one reinsurer that exceeds 3% of the Company's policyholder surplus are displayed below:

NAIC Code	Federal ID#	Name of Reinsurer	Amount
25364	13-1675535	Swiss Reinsurance America Corporation	\$ 1,869,000
11054	43-1898350	Maiden Re North America Inc	\$ 349,000

B. Reinsurance Recoverable in Dispute

Not applicable.

Name of Reinsurer	Total Amount in Dispute (Including IBNR)	Notification	Arbitration	Litigation
	\$ 0	\$ 0	\$ 0	\$ 0

C. Reinsurance Assumed and Ceded

(1)

		Assumed Reinsurance		Ceded Reinsurance		Net	
		Premium Reserve	Commission Equity	Premium Reserve	Commission Equity	Premium Reserve	Commission Equity
a.	Affiliates	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
b.	All Other	0	0	166,969	50,091	(166,969)	(50,091)
c.	Total	\$ 0	\$ 0	\$ 166,969	\$ 50,091	\$ (166,969)	\$ (50,091)
d.	Direct Unearned Premium Reserves			\$ 622,224			

(2)

		Direct	Assumed	Ceded	Net
a.	Contingent commission	\$ 28,891	\$ 0	\$ 0	\$ 28,891
b.	Sliding scale adjustments	0	0	0	0
c.	Other profit commission arrangements	0	0	0	0
d.	Total	\$ 28,891	\$ 0	\$ 0	\$ 28,891

(3) Not applicable.

Protected Cell Name	Covered Exposure	Ultimate Exposure Amount	Fair Value of Assets as of December 31	Initial Contact Date of Securitization Instrument	Maturity Date of Securitized Instrument
		\$ 0	\$ 0		
Total	XXX	\$ 0	\$ 0	XXX	XXX

NOTES TO FINANCIAL STATEMENTS

D. Uncollectible Reinsurance

Not applicable.

(1) The Company has written off in the current year reinsurance balance dues (from the companies listed below) in the amount of \$0 which is reflected as:

a.	Losses incurred	\$	0
b.	Loss adjustment expenses incurred	\$	0
c.	Premiums earned	\$	0
d.	Other	\$	0
e.	Company		Amount
		\$	0

E. Commutation of Ceded Reinsurance

Not applicable.

The Company has reported in its operations in the current year as a result of commutation of reinsurance with the companies listed below, amounts that are reflected as:

(1)	Losses incurred	\$	0
(2)	Loss adjustment expenses incurred	\$	0
(3)	Premiums earned	\$	0
(4)	Other	\$	0
(5)	Company		Amount
		\$	0

F. Retroactive Reinsurance

Not applicable.

(1)

			Reported Company			
As:			Assumed		Ceded	
a.	Reserves Transferred:					
	1.	Initial Reserves	\$	0	\$	0
	2.	Adjustments – Prior Year(s)		0		0
	3.	Adjustments – Current Year		0		0
	4.	Current Total	\$	0	\$	0
b.	Consideration Paid or Received:					
	1.	Initial Consideration	\$	0	\$	0
	2.	Adjustments – Prior Year(s)		0		0
	3.	Adjustments – Current Year		0		0
	4.	Current Total	\$	0	\$	0
c.	Paid Losses Reimbursed or Recovered:					
	1.	Prior Year(s)	\$	0	\$	0
	2.	Current Year		0		0
	3.	Current Total	\$	0	\$	0
d.	Special Surplus from Retroactive Reinsurance:					
	1.	Initial Gain or Loss	\$	0	\$	0
	2.	Adjustments – Prior Year(s)		0		0
	3.	Adjustments – Current Year		0		0
	4.	Current Year Restricted Surplus		0		0
	5.	Cumulative Total Transferred to Unassigned Funds	\$	0	\$	0
e.	All cedents and reinsurers involved in all transactions included in summary totals above.					
	Company		Assumed Amount		Ceded Amount	
			\$ 0		\$ 0	
	Total		\$ 0		\$ 0	
f.	1.	Authorized Reinsurers				
		Company	Total Paid/Loss/LAE Recoverable		Amounts Over 90 Days Overdue	
			\$ 0		\$ 0	
		Total	\$ 0		\$ 0	
	2.	Unauthorized Reinsurers				
		Company	Total Paid/Loss/LAE Recoverable		Amounts Over 90 Days Overdue	
			\$ 0		\$ 0	
		Total	\$ 0		\$ 0	
	3.	Certified Reinsurers				
		Company	Total Paid/Loss/LAE Recoverable		Amounts Over 90 Days Overdue	
			\$ 0		\$ 0	
		Total	\$ 0		\$ 0	

G. Reinsurance Accounted for as a Deposit

Not applicable.

Description	Interest Income	Cash Recoveries	Deposit Balance
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NOTES TO FINANCIAL STATEMENTS

	\$	0	\$	0	\$	0
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H. Disclosures for the Transfer of Property and Casualty Run-off Agreements

Not applicable.

I. Certified Reinsurer Rating Downgraded or Status Subject to Revocation

Not applicable.

(1) Reporting Entity Ceding to Certified Reinsurer Whose Rating was Downgraded or Status Subject to Revocation

Name of Certified Reinsurer	Relationship to Reporting Entity	Date of Action	Jurisdiction of Action	Before	After	Net Obligation Subject to Collateral	Collateral Required (But Not Received)
				0.000%	0.000%	\$ 0	\$ 0

(2) Reporting Entity's Certified Reinsurer Rating Downgraded or Status Subject to Revocation

a.

Date of Action	Jurisdiction of Action	Before	After	Net Obligation Subject to Collateral	Collateral Required (But Not Yet Funded)
		0.000%	0.000%	\$ 0	\$ 0

J. Reinsurance Agreements Qualifying for Reinsurer Aggregation

Not applicable.

(1)

(2) The amount of unexhausted limit as of December 31, 2016

Name of Reinsurer	Amount of Unexhausted Limit
	\$ 0

Note 24 – Retrospectively Rated Contracts and Contracts Subject to Redetermination

A. Not applicable.

B. Not applicable.

C. Not applicable.

D. Medical Loss Ratio Rebates Required Pursuant to the Public Health Service Act.

Not applicable.

		1	2	3	4	5
		Individual	Small Group Employer	Large Group Employer	Other Categories with Rebates	Total
Prior Reporting Year						
(1)	Medical loss ratio rebates incurred	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
(2)	Medical loss ratio rebates paid	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
(3)	Medical loss ratio rebates unpaid	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
(4)	Plus reinsurance assumed amounts	XXX	XXX	XXX	XXX	\$ 0
(5)	Less reinsurance ceded amounts	XXX	XXX	XXX	XXX	\$ 0
(6)	Rebates unpaid net of reinsurance	XXX	XXX	XXX	XXX	\$ 0
Current Reporting Year-to-Date						
(7)	Medical loss ratio rebates incurred	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
(8)	Medical loss ratio rebates paid	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
(9)	Medical loss ratio rebates unpaid	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
(10)	Plus reinsurance assumed amounts	XXX	XXX	XXX	XXX	\$ 0
(11)	Less reinsurance ceded amounts	XXX	XXX	XXX	XXX	\$ 0
(12)	Rebates unpaid net of reinsurance	XXX	XXX	XXX	XXX	\$ 0

E. Nonadmitted Retrospective Premium

Not applicable.

(1) For Ten Percent (10%) Method of determining Nonadmitted Retrospective Premium

a.	Total accrued retro premium	\$ 0
b.	Unsecured amount	0
c.	Less: Nonadmitted amount (10%)	0
d.	Less: Nonadmitted amount for any person for whom agents' balances or uncollected premiums are nonadmitted	0
e.	Admitted amount (a) – (c) – (d)	\$ 0

(2) For Quality Rating Method of Determining Nonadmitted Retrospective Premium

	Insured's Current Quality Rating	(1) Total Amount	(2) Unsecured Balances	%	(3) Nonadmitted Amount (2) x %	(4) Admitted Amount (1) – (3)
a.	1	\$ 0	\$ 0	0.010	\$ 0	\$ 0
b.	2	0	0	0.020	0	0
c.	3	0	0	0.050	0	0

NOTES TO FINANCIAL STATEMENTS

d.	4	0	0	0.100	0	0
e.	5	0	0	0.200	0	0
f.	6	0	0	1.000	0	0
g.	Nonadmitted for any person for whom agents' balances or uncollected premiums are nonadmitted				0	0
h.	Total (a) through (f) – (g)		\$ 0	\$ 0	\$ 0	\$ 0

F. Risk Sharing Provisions of the Affordable Care Act

Not applicable.

- (1) Did the reporting entity write accident and health insurance premium which is subject to the Affordable Care Act risk sharing provisions  
Yes [ ] No [ ]

- (2) Impact of Risk Sharing Provisions of the Affordable Care Act on admitted assets, liabilities and revenue for the current year:

a.	Permanent ACA Risk Adjustment Program		AMOUNT
	Assets		
	1.	Premium adjustments receivable due to ACA Risk Adjustment	\$ 0
	Liabilities		
	2.	Risk adjustment user fees payable for ACA Risk Adjustment	\$ 0
	3.	Premium adjustments payable due to ACA Risk Adjustment	\$ 0
	Operations (Revenue & Expenses)		
	4.	Reported as revenue in premium for accident and health contracts (written/collected) due to ACA Risk Adjustment	\$ 0
	5.	Reported in expenses as ACA Risk Adjustment user fees (incurred/paid)	\$ 0
b.	Transitional ACA Reinsurance Program		
	Assets		
	1.	Amounts recoverable for claims paid due to ACA Reinsurance	\$ 0
	2.	Amounts recoverable for claims unpaid due to ACA Reinsurance (contra liability)	\$ 0
	3.	Amounts receivable relating to uninsured plans for contributions for ACA Reinsurance	\$ 0
	Liabilities		
	4.	Liabilities for contributions payable due to ACA Reinsurance – not reported as ceded premium	\$ 0
	5.	Ceded reinsurance premiums payable due to ACA Reinsurance	\$ 0
	6.	Liabilities for amounts held under uninsured plans contributions for ACA Reinsurance	\$ 0
	Operations (Revenue & Expenses)		
	7.	Ceded reinsurance premiums due to ACA Reinsurance	\$ 0
	8.	Reinsurance recoveries (income statement) due to ACA Reinsurance payments or expected payments	\$ 0
	9.	ACA Reinsurance contributions – not reported as ceded premium	\$ 0
c.	Temporary ACA Risk Corridors Program		
	Assets		
	1.	Accrued retrospective premium due to ACA Risk Corridors	\$ 0
	Liabilities		
	2.	Reserve for rate credits or policy experience rating refunds due to ACA Risk Corridors	\$ 0
	Operations (Revenue & Expenses)		
	3.	Effect of ACA Risk Corridors on net premium income (paid/received)	\$ 0
	4.	Effect of ACA Risk Corridors on change in reserves for rate credits	\$ 0

- (3) Roll forward of prior year ACA Risk Sharing Provisions for the following asset (gross of any nonadmission) and liability balances along with the reasons for adjustments to prior year balance:

		Accrued During the Prior Year on Business Written Before December 31 of the Prior Year		Received or Paid as of the Current Year on Business Written Before December 31 of the Prior Year		Differences		Adjustments				Unsettled Balances as of the Reporting Date	
						Prior Year Accrued Less Payments (Col. 1-3)	Prior Year Accrued Less Payments (Col. 2-4)	To Prior Year Balances	To Prior Year Balances		Cumulative Balance from Prior Years (Col. 1-3+7)	Cumulative Balance from Prior Years (Col. 2-4+8)	
						5	6	7	8		9	10	
		1	2	3	4	5	6	7	8		9	10	
		Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Ref	Receivable	(Payable)	
a.	Permanent ACA Risk Adjustment Program												
	1.	Premium adjustments receivable	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	A	\$ 0	\$ 0
	2.	Premium adjustments (payable)	0	0	0	0	0	0	0	0	B	0	0
	3.	Subtotal ACA Permanent Risk Adjustment Program	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0		\$ 0	\$ 0
b.													
	1.	Amounts recoverable for claims paid	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	C	\$ 0	\$ 0
	2.	Amounts recoverable for claims unpaid (contra liability)	0	0	0	0	0	0	0	0	D	0	0
	3.	Amounts receivable relating to uninsured plans	0	0	0	0	0	0	0	0	E	0	0
	4.	Liabilities for contributions payable due to ACA Reinsurance – not reported as ceded premiums	0	0	0	0	0	0	0	0	F	0	0
	5.	Ceded reinsurance premiums payable	0	0	0	0	0	0	0	0	G	0	0
	6.	Liability for amounts held under uninsured plans	0	0	0	0	0	0	0	0	H	0	0

NOTES TO FINANCIAL STATEMENTS

	7.	Subtotal ACA Transitional Reinsurance Program	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0		\$ 0	\$ 0
c.	1.	Accrued retrospective premium	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	I	\$ 0	\$ 0
	2.	Reserve for rate credits or policy experience rating refunds	0	0	0	0	0	0	0	J	0	0
	3.	Subtotal ACA Risk Corridors Program	0	0	0	0	0	0	0		0	0
	d.	Total for ACA Risk Sharing Provisions	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0		\$ 0	\$ 0

Explanations of Adjustments

- A. Not applicable.
- B.
- C. Not applicable.
- D. Not applicable.
- E.
- F.
- G.
- H. Not applicable.
- I. Not applicable.
- J. Not applicable.

(4) Roll-Forward of Risk Corridors Asset and Liability Balances by Program Benefit Year

Risk Corridors Program Year		Accrued During the Prior Year on Business Written Before December 31 of the Prior Year		Received or Paid as of the Current Year on Business Written Before December 31 of the Prior Year		Differences		Adjustments			Unsettled Balances as of the Reporting Date	
						Prior Year Accrued Less Payments (Col. 1-3)	Prior Year Accrued Less Payments (Col. 2-4)	To Prior Year Balances	To Prior Year Balances		Cumulative Balance from Prior Years (Col. 1-3+7)	Cumulative Balance from Prior Years (Col. 2-4+8)
						1	2	3	4	5	6	7
Risk Corridors Program Year		Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Ref	Receivable	(Payable)
a.	2014											
	1.	Accrued retrospective premium	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	A	\$ 0	\$ 0
	2.	Reserve for rate credits for policy experience rating refunds	0	0	0	0	0	0	0	B	0	0
b.	2015											
	1.	Accrued retrospective premium	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	C	\$ 0	\$ 0
	2.	Reserve for rate credits for policy experience rating refunds	0	0	0	0	0	0	0	D	0	0
c.	2016											
	1.	Accrued retrospective premium	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	E	\$ 0	\$ 0
	2.	Reserve for rate credits or policy experience rating refunds	0	0	0	0	0	0	0	F	0	0
d.	Total for Risk Corridors		\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0		\$ 0	\$ 0

24F(4)d (Columns 1 through 10) should equal 24F(3)c3 (Columns 1 through 10 respectively)

Explanation of Adjustments

- A.
- B.
- C.
- D.
- E.
- F.

(5) ACA Risk Corridors Receivable as of Reporting Date

Risk Corridors Program Year	1 Estimated Amount to be Filed or Final Amount Filed with CMS	2 Non-Accrued Amounts for Impairment or Other Reasons	3 Amounts Received from CMS	4 Asset Balance (Gross of Non-Admissions) (1-2-3)	5 Non-Admitted Amount	5 Net Admitted Asset (4-5)
a.. 2014	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
b. 2015	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
c. 2016	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
d. Total (a+b+c)	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0

24F(5)d (Column 4) should equal 24F(3)c1 (Column 9)

24F(5)d (Column 6) should equal 24F(3)c1

Note 25 – Change in Incurred Losses and Loss Adjustment Expenses

The estimated cost of loss and loss adjustment expenses attributable to insured events of prior years increased by \$343,703 during 2016, as shown in the chart below. This is approximately 11.88% of unpaid losses and loss adjustment expenses of \$2,891,935 as of December 31, 2015. The unfavorable increase is generally the result of ongoing analysis of recent loss development trends. Original estimates are increased or decreased, as additional information becomes known regarding individual claims.



NOTES TO FINANCIAL STATEMENTS

Lines of Business	2016 Calendar Year Losses and LAE Incurred			2016 Loss Year Losses and LAE Incurred	Shortages (Redundancy)
	Losses Incurred	LAE Incurred	Totals		
Auto liability - private passenger	\$2,532,282	\$ 750,195	\$3,282,477	\$ 3,134,188	\$ 148,289
Auto physical damage	401,938	178,579	580,517	599,646	(19,129)
Other Liability	(219)	(169)	(388)	0	(388)
Totals	\$2,934,001	\$ 928,605	\$3,862,606	\$ 3,733,834	\$ 128,772

The following table provides a reconciliation of the beginning and ending loss reserve balances, net of reinsurance recoverable as December 31, 2016 and 2015:

Loss and LAE Reserve Summary	<u>2016</u>	<u>2015</u>
Unpaid losses and LAE at beginning of year	\$ 2,801,104	\$ 2,891,935
Losses and LAE incurred in current year:		
For current year losses and LAE	3,733,835	4,916,762
For prior year losses and LAE	<u>128,772</u>	<u>343,703</u>
Income statement amounts	3,862,607	5,260,465
Losses and LAE paid in current year:		
For current year losses and LAE	2,194,814	3,022,493
For prior year losses and LAE	<u>2,013,323</u>	<u>2,328,803</u>
Underwriting exhibits amounts	<u>4,208,137</u>	<u>5,351,296</u>
Unpaid losses and LAE at end of year	<u>\$ 2,455,574</u>	<u>\$ 2,801,104</u>

Note 26 – Intercompany Pooling Arrangements

- A. Not applicable.
- B. Not applicable.
- C. Not applicable.
- D. Not applicable.
- E. Not applicable.
- F. Not applicable.
- G. Not applicable.

Note 27 – Structured Settlements

Not applicable.

A.

Loss Reserves Eliminated by Annuities	Unrecorded Loss Contingencies
\$ 0	\$ 0

B.

Life Insurance Company and Location	Licensed in Company's State of Domicile YES/NO	Statement Value (i.e. Present Value) of Annuities
		\$ 0

Note 28 – Health Care Receivables

Not applicable.

A. Pharmaceutical Rebate Receivables

Quarter	Estimated Pharmacy Rebates as Reported on Financial Statements	Pharmacy Rebates as Billed or Otherwise Confirmed	Actual Rebates Received Within 90 Days of Billing	Actual Rebates Received Within 91 to 180 Days of Billing	Actual Rebates Received More than 180 Days After Billing
	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0

B. Risk Sharing Receivables

Calendar Year	Evaluation Period Year Ending	Risk Sharing Receivable as Estimated in the Prior Year	Risk Sharing Receivable as Estimated in the Current Year	Risk Sharing Receivable Billed	Risk Sharing Receivable Not Yet Billed	Actual Risk Sharing Amounts Received in Year Billed	Actual Risk Sharing Amounts Received First Year Subsequent	Actual Risk Sharing Amounts Received Second Year Subsequent	Actual Risk Sharing Amounts Received - All Other
0	0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0

Note 29 – Participating Policies

Not applicable.

Note 30 – Premium Deficiency Reserves

NOTES TO FINANCIAL STATEMENTS

Not applicable.

1.

Liability carried for premium deficiency reserve:

\$0
2.

Date of most recent evaluation of this liability:
3.

Was anticipated investment income utilized in the calculation?

Yes [ ]    No [ ]

Note 31 – High Deductibles

Not applicable.

Note 32 – Discounting of Liabilities for Unpaid Losses or Unpaid Loss Adjustment Expenses

Not applicable.

A. Tabular Discount

		Tabular Discount Included in Schedule P, Part 1	
		Case	IBNR
1.	Homeowners/Farmowners	\$ 0	\$ 0
2.	Private Passenger Auto Liability/Medical	0	0
3.	Commercial Auto/Truck Liability/Medical	0	0
4.	Workers' Compensation	0	0
5.	Commercial Multiple Peril	0	0
6.	Medical Professional Liability-Occurrence	0	0
7.	Medical Professional Liability-Claims-Made	0	0
8.	Special Liability	0	0
9.	Other Liability-Occurrence	0	0
10.	Other Liability-Claims Made	0	0
11.	Special Property	0	0
12.	Auto Physical Damage	0	0
13.	Fidelity, Surety	0	0
14.	Other (including credit, A&H)	0	0
15.	International	0	0
16.	Reinsurance Nonproportional Assumed Property	0	0
17.	Reinsurance Nonproportional Assumed Liability	0	0
18.	Reinsurance Nonproportional Assumed Financial Lines	0	0
19.	Products Liability-Occurrence	0	0
20.	Products Liability-Claims-Made	0	0
21.	Financial Guaranty/Mortgage Guaranty	0	0
22.	Warranty	0	0
23.	Total	\$ 0	\$ 0

B. Nontabular Discount

		Case	IBNR	Defense and Cost Containment Expense	Adjusting and Other Expense
1.	Homeowners/Farmowners	\$ 0	\$ 0	\$ 0	\$ 0
2.	Private Passenger Auto Liability/Medical	0	0	0	0
3.	Commercial Auto/Truck Liability/Medical	0	0	0	0
4.	Workers' Compensation	0	0	0	0
5.	Commercial Multiple Peril	0	0	0	0
6.	Medical Professional Liability-Occurrence	0	0	0	0
7.	Medical Professional Liability-Claims-Made	0	0	0	0
8.	Special Liability	0	0	0	0
9.	Other Liability-Occurrence	0	0	0	0
10.	Other Liability-Claims Made	0	0	0	0
11.	Special Property	0	0	0	0
12.	Auto Physical Damage	0	0	0	0
13.	Fidelity, Surety	0	0	0	0
14.	Other (including credit, A&H)	0	0	0	0
15.	International	0	0	0	0
16.	Reinsurance Nonproportional Assumed Property	0	0	0	0
17.	Reinsurance Nonproportional Assumed Liability	0	0	0	0
18.	Reinsurance Nonproportional Assumed Financial Lines	0	0	0	0
19.	Products Liability-Occurrence	0	0	0	0
20.	Products Liability-Claims-Made	0	0	0	0
21.	Financial Guaranty/Mortgage Guaranty	0	0	0	0
22.	Warranty	0	0	0	0
23.	Total	\$ 0	\$ 0	\$ 0	\$ 0

C.

Not applicable.

Note 33 – Asbestos/Environmental Reserves

Not applicable.

NOTES TO FINANCIAL STATEMENTS

A. Does the company have on the books, or has it ever written an insured for which you have identified a potential for the existence of a liability due to asbestos losses?

(1) Direct

	2012	2013	2014	2015	2016
a. Beginning reserves (including Case, Bulk + IBNR Loss & LAE)	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
b. Incurred losses and loss adjustment expense	0	0	0	0	0
c. Calendar year payments for losses and loss adjustment expenses	0	0	0	0	0
d. Ending reserves (including Case, Bulk + IBNR Loss & LAE)	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0

(2) Assumed Reinsurance

	2012	2013	2014	2015	2016
a. Beginning reserves (including Case, Bulk + IBNR Loss & LAE)	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
b. Incurred losses and loss adjustment expense	0	0	0	0	0
c. Calendar year payments for losses and loss adjustment expenses	0	0	0	0	0
d. Ending reserves (including Case, Bulk + IBNR Loss & LAE)	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0

(3) Net of Ceded Reinsurance

	2012	2013	2014	2015	2016
a. Beginning reserves (including Case, Bulk + IBNR Loss & LAE)	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
b. Incurred losses and loss adjustment expense	0	0	0	0	0
c. Calendar year payments for losses and loss adjustment expenses	0	0	0	0	0
d. Ending reserves (including Case, Bulk + IBNR Loss & LAE)	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0

B. State the amount of the ending reserves for Bulk and IBNR included in A (Loss and LAE)

(1) Direct basis	\$ 0
(2) Assumed reinsurance basis	0
(3) Net of ceded reinsurance basis	\$ 0

C. State the amount of the ending reserves for loss adjustment expenses included in A (Case, Bulk and IBNR)

(1) Direct basis	\$ 0
(2) Assumed reinsurance basis	0
(3) Net of ceded reinsurance basis	\$ 0

D. Does the company have on the books, or has it ever written an insured for which you have identified a potential for the existence of a liability due to environmental losses?

(1) Direct

	2012	2013	2014	2015	2016
a. Beginning reserves	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
b. Incurred losses and loss adjustment expense	0	0	0	0	0
c. Calendar year payments for losses and loss adjustment expenses	0	0	0	0	0
d. Ending reserves	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0

(2) Assumed Reinsurance

	2012	2013	2014	2015	2016
a. Beginning reserves	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
b. Incurred losses and loss adjustment expense	0	0	0	0	0
c. Calendar year payments for losses and loss adjustment expenses	0	0	0	0	0
d. Ending reserves	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0

(3) Net of Ceded Reinsurance

	2012	2013	2014	2015	2016
a. Beginning reserves	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
b. Incurred losses and loss adjustment expense	0	0	0	0	0
c. Calendar year payments for losses and loss adjustment expenses	0	0	0	0	0
d. Ending reserves	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0

E. State the amount of the ending reserves for Bulk and IBNR included in D (Loss and LAE)

(1) Direct basis	\$ 0
(2) Assumed reinsurance basis	0
(3) Net of ceded reinsurance basis	\$ 0

NOTES TO FINANCIAL STATEMENTS

F. State the amount of the ending reserves for loss adjustment expenses included in D (Case, Bulk and IBNR)

(1)	Direct basis	\$	0
(2)	Assumed reinsurance basis		0
(3)	Net of ceded reinsurance basis	\$	0

Note 34 – Subscriber Savings Accounts

Not applicable.

Note 35 – Multiple Peril Crop Insurance

Not applicable.

Note 36 – Financial Guaranty Insurance

Not applicable.

A.

(1) Financial guarantee insurance contracts where premiums are received as installment payments over the period of the contract, rather than at inception:

(b) Schedule of premiums (undiscounted) expected to be collected under all installment contracts:

1.	(a)	1st Quarter 2015	\$	0
	(b)	2nd Quarter 2015	\$	0
	(c)	3rd Quarter 2015	\$	0
	(d)	4th Quarter 2015	\$	0
	(e)	Year 2016	\$	0
	(f)	Year 2017	\$	0
	(g)	Year 2018	\$	0
	(h)	Year 2019	\$	0
2.	(a)	2020 through 2024	\$	0
	(b)	2025 through 2029	\$	0
	(c)	2030 through 2034	\$	0
	(d)	2035 through 2039	\$	0
	(e)	2040 through 2044	\$	0
	(f)	2045 through 2049	\$	0
	(g)	2050 through 2054	\$	0
	(h)	2055 through 2059	\$	0
	(i)	2060 through 2064	\$	0
	(j)	2065 through 2069	\$	0
	(k)	2070 through 2074	\$	0
	(l)	2075 through 2079	\$	0
	(m)	2080 through 2084	\$	0
	(n)	2085 through 2089	\$	0
	(o)	2090 through 2094	\$	0
	(p)	2095 through 2099	\$	0
	(q)	2100 through 2104	\$	0
	(r)	2105 through 2109	\$	0
	(s)	2110 through 2114	\$	0
	(t)	2115 through 2119	\$	0
	(u)	2120 through 2124	\$	0
	(v)	2125 through 2129	\$	0
	(w)	2130 through 2134	\$	0
	(x)	2135 through 2139	\$	0
	(y)	2140 through 2144	\$	0

(c) Roll forward of the expected future premiums (undiscounted), including:

1.	Expected future premiums – beginning of year	\$	0
2.	Less: Premium payments received for existing installment contracts	\$	0
3.	Add: Expected premium payments for new installment contracts	\$	0
4.	Adjustments to the expected future premium payments	\$	0
5.	Expected future premiums – end of year	\$	0

(2) Non-installment contracts for which premium revenue recognition has been accelerated:

(b) Schedule of the future expected earned premium revenue on non-installment contracts as of the latest date of the statement of financial position:

1.	(a)	1st Quarter 2015	\$	0
	(b)	2nd Quarter 2015	\$	0
	(c)	3rd Quarter 2015	\$	0
	(d)	4th Quarter 2015	\$	0
	(e)	Year 2016	\$	0
	(f)	Year 2017	\$	0
	(g)	Year 2018	\$	0
	(h)	Year 2019	\$	0
2.	(a)	2020 through 2024	\$	0
	(b)	2025 through 2029	\$	0
	(c)	2030 through 2034	\$	0
	(d)	2035 through 2039	\$	0

NOTES TO FINANCIAL STATEMENTS

(e)	2040 through 2044	\$	0
(f)	2045 through 2049	\$	0
(g)	2050 through 2054	\$	0
(h)	2055 through 2059	\$	0
(i)	2060 through 2064	\$	0
(j)	2065 through 2069	\$	0
(k)	2070 through 2074	\$	0
(l)	2075 through 2079	\$	0
(m)	2080 through 2084	\$	0
(n)	2085 through 2089	\$	0
(o)	2090 through 2094	\$	0
(p)	2095 through 2099	\$	0
(q)	2100 through 2104	\$	0
(r)	2105 through 2109	\$	0
(s)	2110 through 2114	\$	0
(t)	2115 through 2119	\$	0
(u)	2120 through 2124	\$	0
(v)	2125 through 2129	\$	0
(w)	2130 through 2134	\$	0
(x)	2135 through 2139	\$	0
(y)	2140 through 2144	\$	0

(3) Claim Liability

(b) Significant components of the change in the claim liability for the period:

1.	Accretion of the discount	\$	0
2.	Changes in timing		0
3.	New reserves for defaults of insured contracts		0
4.	Change in deficiency reserves		0
5.	Change in incurred but not reported claims		0
6.	Total	\$	0

(4)

B. Schedule of Insured Financial Obligations at the End of the Period:

		Surveillance Categories				
		A	B	C	D	Total
(1)	Number of policies	0	0	0	0	0
(2)	Remaining weighted average contract period (in years)	0.000	0.000	0.000	0.000	XXX
(3)	Insured contractual payments outstanding:					
	a. Principal	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
	b. Interest	0	0	0	0	0
	c. Total	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
(4)	Gross claim liability	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
Less						
(5)	a. Gross potential recoveries	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
	b. Discount, net	0	0	0	0	0
(6)	Net claim liability	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
(7)	Unearned premium revenue	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
(8)	Reinsurance recoverables	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

1.1

Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer?  
If yes, complete Schedule Y, Parts 1, 1A and 2.

Yes [ X ]    No [   ]

1.2

If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements substantially similar to those required by such Act and regulations?

Yes [ X ]    No [   ]    N/A [   ]

1.3

State regulating?    West Virginia

2.1

Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity?

Yes [   ]    No [ X ]

2.2

If yes, date of change:

3.1

State as of what date the latest financial examination of the reporting entity was made or is being made.

12/31/2013

3.2

State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released.

12/31/2013

3.3

State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date).

01/09/2015

3.4

By what department or departments?  
West Virginia Insurance Commission

3.5

Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with departments?

Yes [   ]    No [   ]    N/A [ X ]

3.6

Have all of the recommendations within the latest financial examination report been complied with?

Yes [ X ]    No [   ]    N/A [   ]

4.1

During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity) receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:

4.11

sales of new business?

Yes [   ]    No [ X ]

4.12

renewals?

Yes [   ]    No [ X ]

4.2

During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:

4.21

sales of new business?

Yes [   ]    No [ X ]

4.22

renewals?

Yes [   ]    No [ X ]

5.1

Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?

Yes [   ]    No [ X ]

5.2

If yes, provide the name of entity, NAIC company code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

1	2 NAIC Company Code	3 State of Domicile
Name of Entity	0	

6.1

Has the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period?

Yes [ X ]    No [   ]

6.2

If yes, give full information:  
The Company voluntarily agreed to the suspension of its license in Virginia since the Company's Surplus fell below the required amount to write in Virginia.

7.1

Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity?

Yes [   ]    No [ X ]

7.2

If yes,

7.21

State the percentage of foreign control

0.000%

7.22

State the nationality(s) of the foreign person(s) or entity(s); or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact and identify the type of entity(s) (e.g., individual, corporation, government, manager or attorney-in-fact).

1 Nationality	2 Type of Entity

8.1

Is the company a subsidiary of a bank holding company regulated with the Federal Reserve Board?

Yes [   ]    No [ X ]

8.2

If response to 8.1 is yes, please identify the name of the bank holding company.

8.3

Is the company affiliated with one or more banks, thrifts or securities firms?

Yes [   ]    No [ X ]

8.4

If the response to 8.3 is yes, please provide below the names and locations (city and state of the main office) of any affiliates regulated by a federal financial regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.

1 Affiliate Name	2 Location (City, State)	3 FRB	4 OCC	5 FDIC	6 SEC

9.

What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?  
William Earp Public Accounting, P.L.L.C.; 890 Four States Road, Worthington, WV 26591

10.1

Has the insurer been granted any exemptions to the prohibited non-audit services provided by the certified independent public accountant requirements as allowed in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Rule), or substantially similar state law or regulation?

Yes [   ]    No [ X ]

10.2

If the response to 10.1 is yes, provide information related to this exemption:

10.3

Has the insurer been granted any exemptions related to other requirements of the Annual Financial Reporting Model Regulation as allowed for in Section 18A of the Model Regulation, or substantially similar state law or regulation?

Yes [   ]    No [ X ]

10.4

If the response to 10.3 is yes, provide information related to this exemption:

10.5

Has the reporting entity established an Audit Committee in compliance with the domiciliary state insurance laws?

Yes [ X ]    No [   ]    N/A [   ]

10.6

If the response to 10.5 is no or n/a, please explain:

11.

What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with an actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification?

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

John Booher, ACAS, MAAA (consultant); Actuarial Insurance Consultants, Ltd.; 381 Highway 20, Loganville, GA 30052

- 12.1Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly?

Yes [ ]No [X]
- 12.11Name of real estate holding company
- 12.12Number of parcels involved

0
- 12.13Total book/adjusted carrying value

\$0
- 12.2If yes, provide explanation
- 13.FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY:
- 13.1What changes have been made during the year in the United States manager or the United States trustees of the reporting entity?
- 13.2Does this statement contain all business transacted for the reporting entity through its United States Branch on risks wherever located?

Yes [ ]No [ ]
- 13.3Have there been any changes made to any of the trust indentures during the year?

Yes [ ]No [ ]
- 13.4If answer to (13.3) is yes, has the domiciliary or entry state approved the changes?

Yes [ ]No [ ]N/A [ ]
- 14.1Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?

Yes [X]No [ ]
- (a)Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
- (b)Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
- (c)Compliance with applicable governmental laws, rules and regulations;
- (d)The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
- (e)Accountability for adherence to the code.
- 14.11If the response to 14.1 is no, please explain:
- 14.2Has the code of ethics for senior managers been amended?

Yes [ ]No [X]
- 14.21If the response to 14.2 is yes, provide information related to amendment(s).
- 14.3Have any provisions of the code of ethics been waived for any of the specified officers?

Yes [ ]No [X]
- 14.31If the response to 14.3 is yes, provide the nature of any waiver(s).

- 15.1Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance where the issuing or confirming bank is not on the SVO Bank List?

Yes [ ]No [X]
- 15.2If the response to 15.1 is yes, indicate the American Bankers Association (ABA) Routing Number and the name of the issuing or confirming bank of the Letter of Credit and describe the circumstances in which the Letter of Credit is triggered.

1	2	3	4
American Bankers Association (ABA) Routing Number	Issuing or Confirming Bank Name	Circumstances That Can Trigger the Letter of Credit	Amount
0			0

BOARD OF DIRECTORS

- 16.Is the purchase or sale of all investments of the reporting entity passed upon either by the Board of Directors or a subordinator committee thereof?

Yes [X]No [ ]
- 17.Does the reporting entity keep a complete permanent record of the proceedings of its Board of Directors and all subordinate committees thereof?

Yes [X]No [ ]
- 18.Has the reporting entity an established procedure for disclosure to its Board of Directors or trustees of any material interest or affiliation on the part of any of its officers, directors, trustees or responsible employees that is in conflict or is likely to conflict with the official duties of such person?

Yes [X]No [ ]

FINANCIAL

- 19.Has this statement been prepared using a basis of accounting other than Statutory Accounting Principles (e.g., Generally Accepted Accounting Principles)?

Yes [ ]No [X]
- 20.1Total amount loaned during the year (inclusive of Separate Accounts, exclusive of policy loans):

\$0
- 20.11To directors or other officers

\$0
- 20.12To stockholders not officers

\$0
- 20.13Trustees, supreme or grand (Fraternal only)

\$0
- 20.2Total amount of loans outstanding at the end of year (inclusive of Separate Accounts, exclusive of policy loans):

\$0
- 20.21To directors or other officers

\$0
- 20.22To stockholders not officers

\$0
- 20.23Trustees, supreme or grand (Fraternal only)

\$0
- 21.1Were any assets reported in this statement subject to a contractual obligation to transfer to another party without the liability for such obligation being reporting in the statement?

Yes [ ]No [X]
- 21.2If yes, state the amount thereof at December 31 of the current year:

\$0
- 21.21Rented from others

\$0
- 21.22Borrowed from others

\$0
- 21.23Leased from others

\$0
- 21.24Other

\$0
- 22.1Does this statement include payments for assessments as described in the Annual Statement Instructions other than guaranty fund or guaranty association assessments?

Yes [ ]No [X]
- 22.2If answer is yes:

\$0
- 22.21Amount paid as losses or risk adjustment

\$0
- 22.22Amount paid as expenses

\$0
- 22.23Other amounts paid

\$0
- 23.1Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement?

Yes [ ]No [X]
- 23.2If yes, indicate any amounts receivable from parent included in the Page 2 amount:

\$0

INVESTMENT

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

24.01

Were all of stocks, bonds and other securities owned December 31 of current year, over which the reporting entity has exclusive control, in the actual possession of the reporting entity on said date (other than securities lending programs addressed in 24.03)?

Yes ☒ No ☐

24.02

If no, give full and complete information, relating thereto:

24.03

For security lending programs, provide a description of the program including value for collateral and amount of loaned securities, and whether collateral is carried on or off-balance sheet (an alternative is to reference Note 17 where this information is also provided).

24.04

Does the company's security lending program meet the requirements for a conforming program as outlined in the *Risk-Based Capital Instructions*?

Yes ☐ No ☐ N/A ☒

24.05

If answer to 24.04 is yes, report amount of collateral for conforming programs.

\$0

24.06

If answer to 24.04 is no, report amount of collateral for other programs

\$0

24.07

Does your securities lending program require 102% (domestic securities) and 105% (foreign securities) from the counterparty at the outset of the contract?

Yes ☐ No ☐ N/A ☒

24.08

Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%?

Yes ☐ No ☐ N/A ☒

24.09

Does the reporting entity or the reporting entity's securities lending agent utilize the Master Securities Lending Agreement (MSLA) to conduct securities lending?

Yes ☐ No ☐ N/A ☒

24.10

For the reporting entity's security lending program, state the amount of the following as of December 31 of the current year:

24.101

Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2:

\$0

24.102

Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2:

\$0

24.103

Total payable for securities lending reported on the liability page:

\$0

25.1

Were any of the stocks, bonds or other assets of the reporting entity owned at December 31 of the current year not exclusively under the control of the reporting entity or has the reporting entity sold or transferred any assets subject to a put option contract that is current in force? (Exclude securities subject to Interrogatory 21.1 and 24.03.)

Yes ☒ No ☐

25.2

If yes, state the amount thereof at December 31 of the current year:

25.21

Subject to repurchase agreements

\$0

25.22

Subject to reverse repurchase agreements

\$0

25.23

Subject to dollar repurchase agreements

\$0

25.24

Subject to reverse dollar repurchase agreements

\$0

25.25

Placed under option agreements

\$0

25.26

Letter stock or securities restricted as sale – excluding FHLB Capital Stock

\$0

25.27

FHLB Capital Stock

\$0

25.28

On deposit with states

\$519,800

25.29

On deposit with other regulatory bodies

\$0

25.30

Pledged as collateral – excluding collateral pledged to an FHLB

\$0

25.31

Pledged as collateral to FHLB – including assets backing funding agreements

\$0

25.32

Other

\$0

25.3

For category (25.26) provide the following:

1 Nature of Restriction	2 Description	3 Amount
		\$0

26.1

Does the reporting entity have any hedging transactions reported on Schedule DB?

Yes ☐ No ☒

26.2

If yes, has a comprehensive description of the hedging program been made available to the domiciliary state?  
If no, attach a description with this statement.

Yes ☐ No ☐ N/A ☒

27.1

Were any preferred stocks or bonds owned as of December 31 of the current year mandatorily convertible into equity, or, at the option of the issuer, convertible into equity?

Yes ☐ No ☒

27.2

If yes, state the amount thereof at December 31 of the current year:

\$0

28.

Excluding items in Schedule E-Part 3-Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC *Financial Condition Examiners Handbook*?

Yes ☒ No ☐

28.01

For all agreements that comply with the requirements of the NAIC *Financial Condition Examiners Handbook*, complete the following:

1 Name of Custodian(s)	2 Custodian's Address
Branch Banking and Trust Company	223 West Nash Street, Wilson , NC 27893

28.02

For all agreements that do not comply with the requirements of the NAIC *Financial Condition Examiners Handbook*, provide the name, location and a complete explanation

1 Name(s)	2 Location(s)	3 Complete Explanation(s)

28.03

Have there been any changes, including name changes, in the custodian(s) identified in 28.01 during the current year?

Yes ☐ No ☒

28.04

If yes, give full and complete information relating thereto:

1 Old Custodian	2 New Custodian	3 Date of Change	4 Reason

28.05

Investment management – Identify all investment advisors, investment managers, broker/dealers, including individuals that have the authority to make investment decisions on behalf of the reporting entity. For assets that are managed internally by employees of the reporting entity, note as such. ["...that have access to the investment accounts", "... handle securities"].

1 Name of Firm or Individual	2 Affiliation
Branch Banking and Trust Company	U

28.0597

For those firms/individuals listed in the table for Question 28.05, do any firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") manage more than 10% of the reporting entity's assets?

Yes ☒ No ☐



GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

28.0598 For firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") listed in the table for Question 28.05, does the total assets under management aggregate to more than 50% of the reporting entity's assets? Yes [ X ] No [ ]

28.06

For those firms or individuals listed in the table for 28.05 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the information for the table below.

1	2	3	4	5
Central Registration Depository Number	Name of Firm or Individual	Legal Entity Identifier (LEI)	Registered With	Investment Management Agreement (IMA) Filed
106156	Branch Banking and Trust Company		SEC	DS

29.1 Does the reporting entity have any diversified mutual funds reported in Schedule D-Part 2 (diversified according to the Securities and Exchange Commission (SEC) in the Investment Company Act of 1940 [Section 5 (b) (1)])? Yes [ ] No [ X ]

29.2

If yes, complete the following schedule:

1	2	3
CUSIP	Name of Mutual Fund	Book/Adjusted Carrying Value
		0
29.2999 TOTAL		0

29.3

For each mutual fund listed in the table above, complete the following schedule:

1	2	3	4
Name of Mutual Fund (from above table)	Name of Significant Holding of the Mutual Fund	Amount of Mutual Fund's Book/Adjusted Carrying Value Attributable to the Holding	Date of Valuation
		0	

30. Provide the following information for all short-term and long-term bonds and all preferred stocks. Do not substitute amortized value or statement value for fair value.

		1	2	3
		Statement (Admitted) Value	Fair Value	Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
30.1	Bonds	5,128,076	5,128,428	352
30.2	Preferred Stocks	0	0	0
30.3	Totals	5,128,076	5,128,428	352

30.4 Describe the sources or methods utilized in determining the fair values:  
Unit prices provided by our investment custodians were utilized in determining the fair values.

31.1 Was the rate used to calculate fair value determined by a broker or custodian for any of the securities in Schedule D? Yes [ X ] No [ ]

31.2 If the answer to 31.1 is yes, does the reporting entity have a copy of the broker's or custodian's pricing policy (hard copy or electronic copy) for all brokers or custodians used as a pricing source? Yes [ X ] No [ ]

31.3 If the answer to 31.2 is no, describe the reporting entity's process for determining a reliable pricing source for purposes of disclosure of fair value for Schedule D:

32.1 Have all the filing requirements of the *Purposes and Procedures Manual of the NAIC Investment Analysis Office* been followed? Yes [ X ] No [ ]

32.2 If no, list exceptions:

OTHER

33.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any? \$ 92,128

33.2	List the name of the organization and the amount paid if any such payment represented 25% or more of the total payments to trade associations, service organizations and statistical or rating bureaus during the period covered by this statement.						
	<table><tr><td>1</td><td>2</td></tr><tr><td>Name</td><td>Amount Paid</td></tr><tr><td>Insurance Services Office, Inc.</td><td>\$ 57,527</td></tr></table>	1	2	Name	Amount Paid	Insurance Services Office, Inc.	\$ 57,527
1	2						
Name	Amount Paid						
Insurance Services Office, Inc.	\$ 57,527						

34.1 Amount of payments for legal expenses, if any? \$ 21,575

34.2	List the name of the firm and the amount paid if any such payment represented 25% or more of the total payments for legal expenses during the period covered by this statement.						
	<table><tr><td>1</td><td>2</td></tr><tr><td>Name</td><td>Amount Paid</td></tr><tr><td>Dinsmore &amp; Shohl, LLP</td><td>\$ 6,913</td></tr></table>	1	2	Name	Amount Paid	Dinsmore & Shohl, LLP	\$ 6,913
1	2						
Name	Amount Paid						
Dinsmore & Shohl, LLP	\$ 6,913						

35.1 Amount of payments for expenditures in connection with matters before legislative bodies, officers or departments of government, if any? \$ 0

35.2	List the name of the firm and the amount paid if any such payment represented 25% or more of the total payment expenditures in connection with matters before legislative bodies, officers or departments of government during the period covered by this statement.						
	<table><tr><td>1</td><td>2</td></tr><tr><td>Name</td><td>Amount Paid</td></tr><tr><td></td><td>\$ 0</td></tr></table>	1	2	Name	Amount Paid		\$ 0
1	2						
Name	Amount Paid						
	\$ 0						

GENERAL INTERROGATORIES

PART 2 – PROPERTY & CASUALTY INTERROGATORIES

1.1

Does the reporting entity have any direct Medicare Supplement Insurance in force?

Yes [ ]

No [X]

1.2

If yes, indicate premium earned on U.S. business only.

\$

0

1.3

What portion of Item (1.2) is not reported on the Medicare Supplement Insurance Experience Exhibit?

\$

0

1.31

Reason for excluding:

1.4

Indicate amount of earned premium attributable to Canadian and/or Other Alien not included in Item (1.2) above.

\$

0

1.5

Indicate total incurred claims on all Medicare Supplement insurance.

\$

0

1.6

Individual policies:

Most current three years:

1.61

Total premium earned

\$

0

1.62

Total incurred claims

\$

0

1.63

Number of covered lives

0

All years prior to most current three years:

1.64

Total premium earned

\$

0

1.65

Total incurred claims

\$

0

1.66

Number of covered lives

0

1.7

Group policies:

Most current three years:

1.71

Total premium earned

\$

0

1.72

Total incurred claims

\$

0

1.73

Number of covered lives

0

All years prior to most current three years:

1.74

Total premium earned

\$

0

1.75

Total incurred claims

\$

0

1.76

Number of covered lives

0

2.

Health Test:

1

Current Year

2.1

Premium Numerator

\$

0

2.2

Premium Denominator

\$

4,130,528

2.3

Premium Ratio (2.1/2.2)

0.000

2.4

Reserve Numerator

\$

0

2.5

Reserve Denominator

\$

3,077,798

2.6

Reserve Ratio (2.4/2.5)

0.000

2

Prior Year

2.1

Premium Numerator

\$

0

2.2

Premium Denominator

\$

5,087,038

2.3

Premium Ratio (2.1/2.2)

0.000

2.4

Reserve Numerator

\$

0

2.5

Reserve Denominator

\$

3,806,257

2.6

Reserve Ratio (2.4/2.5)

0.000

3.1

Does the reporting entity issue both participating and non-participating policies?

Yes [ ]

No [X]

3.2

If yes, state the amount of calendar year premiums written on:

3.21

Participating policies

\$

0

3.22

Non-participating policies

\$

0

4.

FOR MUTUAL REPORTING ENTITIES AND RECIPROCAL EXCHANGES ONLY:

4.1

Does the reporting entity issue assessable policies?

Yes [ ]

No [ ]

4.2

Does the reporting entity issue non-assessable policies?

Yes [ ]

No [ ]

4.3

If assessable policies are issued, what is the extent of the contingent liability of the policyholders?

0.000%

4.4

Total amount of assessments paid or ordered to be paid during the year on deposit notes or contingent premiums.

\$

0

5.

FOR RECIPROCAL EXCHANGES ONLY:

5.1

Does the exchange appoint local agents?

Yes [ ]

No [ ]

5.2

If yes, is the commission paid:

5.21

Out of Attorney's-in-fact compensation

Yes [ ]

No [ ]

N/A [ ]

5.22

As a direct expense of the exchange

Yes [ ]

No [ ]

N/A [ ]

5.3

What expenses of the exchange are not paid out of the compensation of the Attorney-in-fact?

5.4

Has any Attorney-in-fact compensation, contingent on fulfillment of certain conditions, been deferred?

Yes [ ]

No [ ]

5.5

If yes, give full information:

6.1

What provision has this reporting entity made to protect itself from an excessive loss in the event of a catastrophe under a workers' compensation contract issued without limit of loss?

The Company does not write this line of business.

6.2

Describe the method used to estimate this reporting entity's probable maximum insurance loss, and identify the type of insured exposures comprising that probable maximum loss, the locations of concentrations of those exposures and the external resources (such as consulting firms or computer software models), if any, used in the estimation process:

The maximum policy limit on liability coverages under personal auto lines of business in West Virginia and Virginia. The Company's risks are spread throughout the states of West Virginia and Virginia.

6.3

What provision has this reporting entity made (such as catastrophic reinsurance program) to protect itself from an excessive loss arising from the types and concentrations of insured exposures comprising its probable maximum property insurance loss?

Since none of the Company's inforce auto policies having net limits in excess of \$60,000, no provision has been made for protection from an excessive concentration loss.

6.4

Does the reporting entity carry catastrophe reinsurance protection for at least one reinstatement, in an amount sufficient to cover its estimated probable maximum loss attributable to a single loss event or occurrence?

Yes [ ]

No [X]

6.5

If no, describe any arrangements or mechanisms employed by the reporting entity to supplement its catastrophe reinsurance program or to hedge its exposure to uninsured catastrophic loss:

With our private passenger auto liability and physical damage written premiums spread throughout the states of West Virginia and Virginia, the Company feels there is minimal exposure to an uninsured catastrophic loss.

16

GENERAL INTERROGATORIES

PART 2 – PROPERTY & CASUALTY INTERROGATORIES

7.1	Has the reporting entity reinsured any risk with any other entity under a quota share reinsurance contract that includes a provision that would limit the reinsurer’s losses below the stated quota share percentage (e.g., a deductible, a loss ratio corridor, a loss cap, an aggregate limit or any similar provisions)?	Yes [ <input type="checkbox"/> ]	No [ <input checked="" type="checkbox"/> X ]
7.2	If yes, indicate the number of reinsurance contracts containing such provisions.	<div>0</div>	
7.3	If yes, does the amount of reinsurance credit taken reflect the reduction in quota share coverage caused by any applicable limiting provision(s)?	Yes [ <input type="checkbox"/> ]	No [ <input type="checkbox"/> ]
8.1	Has this reporting entity reinsured any risk with any other entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on this risk, or portion thereof, reinsured?	Yes [ <input type="checkbox"/> ]	No [ <input checked="" type="checkbox"/> X ]
8.2	If yes, give full information		
9.1	Has the reporting entity ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates) for which during the period covered by the statement: (i) it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; (ii) it accounted for that contract as reinsurance and not as a deposit; and (iii) the contract(s) contain one or more of the following features or other features that would have similar results: <div><div>(a)</div><div>A contract term longer than two years and the contract is noncancellable by the reporting entity during the contract term;</div><div>(b)</div><div>A limited or conditional cancellation provision under which cancellation triggers an obligation by the reporting entity, or an affiliate of the reporting entity, to enter into a new reinsurance contract with the reinsurer, or an affiliate of the reinsurer;</div><div>(c)</div><div>Aggregate stop loss reinsurance coverage;</div><div>(d)</div><div>A unilateral right by either party (or both parties) to commute the reinsurance contract, whether conditional or not, except for such provisions which are only triggered by a decline in the credit status of the other party;</div><div>(e)</div><div>A provision permitting reporting of losses, or payment of losses, less frequently than on a quarterly basis (unless there is no activity during the period); or</div><div>(f)</div><div>Payment schedule, accumulating retentions from multiple years or any features inherently designed to delay timing of the reimbursement to the ceding entity?</div></div>	Yes [ <input type="checkbox"/> ]	No [ <input checked="" type="checkbox"/> X ]
9.2	Has the reporting entity during the period covered by the statement ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates), for which, during the period covered by the statement, it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; excluding cessions to approved pooling arrangements or to captive insurance companies that are directly or indirectly controlling, controlled by, or under common control with (i) one or more unaffiliated policyholders of the reporting entity, or (ii) an association of which one or more unaffiliated policyholders of the reporting entity is a member where: <div><div>(a)</div><div>The written premium ceded to the reinsurer by the reporting entity or its affiliates represents fifty percent (50%) or more of the entire direct and assumed premium written by the reinsurer based on its most recently available financial statement; or</div><div>(b)</div><div>Twenty-five percent (25%) or more of the written premium ceded to the reinsurer has been retroceded back to the reporting entity or its affiliates in a separate reinsurance contract.</div></div>	Yes [ <input type="checkbox"/> ]	No [ <input checked="" type="checkbox"/> X ]
9.3	If yes to 9.1 or 9.2, please provide the following information in the Reinsurance Summary Supplemental Filing for General Interrogatory 9: <div><div>(a)</div><div>The aggregate financial statement impact gross of all such ceded reinsurance contracts on the balance sheet and statement of income;</div><div>(b)</div><div>A summary of the reinsurance contract terms and indicate whether it applies to the contracts meeting the criteria in 9.1 or 9.2; and</div><div>(c)</div><div>A brief discussion of management’s principle objectives in entering into the reinsurance contract including the economic purpose to be achieved.</div></div>		
9.4	Except for transactions meeting the requirements of paragraph 31 of <i>SSAP No. 62R, Property and Casualty Reinsurance</i> , has the reporting entity ceded any risk under any reinsurance contract (or multiple contracts with the same reinsurer or its affiliates) during the period covered by the financial statement, and either: <div><div>(a)</div><div>Accounted for that contract as reinsurance (either prospective or retroactive) under statutory accounting principles (“SAP”) and as a deposit under generally accepted accounting principles (“GAAP”); or</div><div>(b)</div><div>Accounted for that contract as reinsurance under GAAP and as a deposit under SAP?</div></div>	Yes [ <input type="checkbox"/> ]	No [ <input checked="" type="checkbox"/> X ]
9.5	If yes to 9.4, explain in the Reinsurance Summary Supplemental Filing for General Interrogatory 9 (Section D) why the contract(s) is treated differently for GAAP and SAP.		
9.6	The reporting entity is exempt from the Reinsurance Attestation Supplement under one or more of the following criteria: <div><div>(a)</div><div>The entity does not utilize reinsurance; or,</div><div>(b)</div><div>The entity only engages in a 100% quota share contract with an affiliate and the affiliated or lead company has filed an attestation supplement; or</div><div>(c)</div><div>The entity has no external cessions and only participates in an intercompany pool and the affiliated or lead company has filed an attestation supplement.</div></div>	Yes [ <input type="checkbox"/> ]	No [ <input checked="" type="checkbox"/> X ]
10.	If the reporting entity has assumed risks from another entity, there should be charged on account of such reinsurances a reserve equal to that which the original entity would have been required to charge had it retained the risks. Has this been done?	Yes [ <input type="checkbox"/> ]	No [ <input type="checkbox"/> ] N/A [ <input checked="" type="checkbox"/> X ]
11.1	Has the reporting entity guaranteed policies issued by any other entity and now in force?	Yes [ <input type="checkbox"/> ]	No [ <input checked="" type="checkbox"/> X ]
11.2	If yes, give full information		
12.1	If the reporting entity recorded accrued retrospective premiums on insurance contracts on Line 15.3 of the assets schedule, Page 2, state the amount of corresponding liabilities recorded for: <div><div>12.11</div><div>Unpaid losses</div><div>12.12</div><div>Unpaid underwriting expenses (including loss adjustment expenses)</div></div>	<div>\$</div>	<div>0</div>
12.2	Of the amount on Line 15.3, Page 2, state the amount that is secured by letters of credit, collateral and other funds?	<div>\$</div>	<div>0</div>
12.3	If the reporting entity underwrites commercial insurance risks, such as workers’ compensation, are premium notes or promissory notes accepted from its insureds covering unpaid premiums and/or unpaid losses?	Yes [ <input type="checkbox"/> ]	No [ <input type="checkbox"/> ] N/A [ <input checked="" type="checkbox"/> X ]
12.4	If yes, provide the range of interest rates charged under such notes during the period covered by this statement: <div><div>12.41</div><div>From</div><div>12.42</div><div>To</div></div>	<div>0.000%</div>	<div>0.000%</div>
12.5	Are letters of credit or collateral and other funds received from insureds being utilized by the reporting entity to secure premium notes or promissory notes taken by a reporting entity, or to secure any of the reporting entity’s reported direct unpaid loss reserves, including unpaid losses under loss deductible features of commercial policies?	Yes [ <input type="checkbox"/> ]	No [ <input checked="" type="checkbox"/> X ]
12.6	If yes, state the amount thereof at December 31 of current year: <div><div>12.61</div><div>Letters of Credit</div><div>12.62</div><div>Collateral and other funds</div></div>	<div>\$</div>	<div>0</div>
13.1	Largest net aggregate amount insured in any one risk (excluding workers’ compensation):	<div>\$</div>	<div>60,000</div>

GENERAL INTERROGATORIES

PART 2 – PROPERTY & CASUALTY INTERROGATORIES

13.2

Does any reinsurance contract considered in the calculation of this amount include an aggregate limit of recovery without also including a reinstatement provision?

Yes [ ]

No [X]

13.3

State the number of reinsurance contracts (excluding individual facultative risk certificates, but including facultative programs, automatic facilities or facultative obligatory contracts) considered in the calculation of the amount.

1

14.1

Is the reporting entity a cedant in a multiple cedant reinsurance contract?

Yes [ ]

No [X]

14.2

If yes, please describe the method of allocating and recording reinsurance among the cedants:

14.3

If the answer to 14.1 is yes, are the methods described in item 14.2 entirely contained in the respective multiple cedant reinsurance contracts?

Yes [ ]

No [ ]

14.4

If the answer to 14.3 is no, are all the methods described in 14.2 entirely contained in written agreements?

Yes [ ]

No [ ]

14.5

If the answer to 14.4 is no, please explain:

15.1

Has the reporting entity guaranteed any financed premium accounts?

Yes [ ]

No [X]

15.2

If yes, give full information

16.1

Does the reporting entity write any warranty business?

Yes [ ]

No [X]

If yes, disclose the following information for each of the following types of warranty coverage:

	1	2	3	4	5
	Direct Losses Incurred	Direct Losses Unpaid	Direct Written Premium	Direct Premium Unearned	Direct Premium Earned
16.11 Home	\$ 0	\$ 0	\$ 0	\$ 0	0
16.12 Products	\$ 0	\$ 0	\$ 0	\$ 0	0
16.13 Automobile	\$ 0	\$ 0	\$ 0	\$ 0	0
16.14 Other*	\$ 0	\$ 0	\$ 0	\$ 0	0

\* Disclose type of coverage:

17.1

Does the reporting entity include amounts recoverable on unauthorized reinsurance in Schedule F-Part 3 that it excludes from Schedule F-Part 5.

Yes [ ]

No [X]

Included but not reported losses on contracts in force prior to July 1, 1984, and not subsequently renewed are exempt from inclusion in Schedule F-Part 5. Provide the following information for this exemption:

17.11	Gross amount of unauthorized reinsurance in Schedule F-Part 3 excluded from Schedule F-Part 5	\$ 0
17.12	Unfunded portion of Interrogatory 17.11	\$ 0
17.13	Paid losses and loss adjustment expenses portion of Interrogatory 17.11	\$ 0
17.14	Case reserves portion of Interrogatory 17.11	\$ 0
17.15	Incurred but not reported portion of Interrogatory 17.11	\$ 0
17.16	Unearned premium portion of Interrogatory 17.11	\$ 0
17.17	Contingent commission portion of Interrogatory 17.11	\$ 0

Provide the following information for all other amounts included in Schedule F-Part 3 and excluded from Schedule F-Part 5, not included above.

17.18	Gross amount of unauthorized reinsurance in Schedule F-Part 3 excluded from Schedule F-Part 5	\$ 0
17.19	Unfunded portion of Interrogatory 17.18	\$ 0
17.20	Paid losses and loss adjustment expenses portion of Interrogatory 17.18	\$ 0
17.21	Case reserves portion of Interrogatory 17.18	\$ 0
17.22	Incurred but not reported portion of Interrogatory 17.18	\$ 0
17.23	Unearned premium portion of Interrogatory 17.18	\$ 0
17.24	Contingent commission portion of Interrogatory 17.18	\$ 0

18.1

Do you act as a custodian for health savings accounts?

Yes [ ]

No [X]

18.2

If yes, please provide the amount of custodial funds held as of the reporting date.

\$ 0

18.3

Do you act as an administrator for health savings accounts?

Yes [ ]

No [X]

18.4

If yes, please provide the balance of the funds administered as of the reporting date.

\$ 0

FIVE-YEAR HISTORICAL DATA

Show amounts in whole dollars only, no cents; show percentages to one decimal place, i.e. 17.6.

	1 2016	2 2015	3 2014	4 2013	5 2012
<b>Gross Premiums Written (Page 8, Part 1B, Cols. 1, 2 &amp; 3)</b>					
1. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4).....	5,508,143	7,357,981	9,716,989	8,178,613	7,643,719
2. Property lines (Lines 1, 2, 9, 12, 21 & 26).....	719,111	1,682,267	2,963,911	2,026,968	1,618,691
3. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27).....	0	0	0	0	9,906
4. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34).....	0	0	0	0	190
5. Nonproportional reinsurance lines (Lines 31, 32 & 33).....	0	0	0	0	0
6. Total (Line 35).....	6,227,254	9,040,248	12,680,900	10,205,581	9,272,506
<b>Net Premiums Written (Page 8, Part 1B, Col. 6)</b>					
7. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4).....	3,316,160	3,679,737	4,854,876	5,184,075	6,775,120
8. Property lines (Lines 1, 2, 9, 12, 21 & 26).....	431,439	841,187	1,481,476	1,229,967	1,364,982
9. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27).....	0	0	0	0	1,981
10. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34).....	0	0	0	0	0
11. Nonproportional reinsurance lines (Lines 31, 32 & 33).....	0	0	0	0	0
12. Total (Line 35).....	3,747,599	4,520,924	6,336,352	6,414,042	8,142,083
<b>Statement of Income (Page 4)</b>					
13. Net underwriting gain (loss) (Line 8).....	(1,141,500)	(1,797,867)	(800,151)	(602,113)	(793,192)
14. Net investment gain (loss) (Line 11).....	106,266	139,591	158,881	285,409	151,242
15. Total other income (Line 15).....	298,025	505,224	654,738	329,397	(104,020)
16. Dividends to policyholders (Line 17).....	0	0	0	0	0
17. Federal and foreign income taxes incurred (Line 19).....	0	0	0	231	(90,268)
18. Net income (Line 20).....	(737,209)	(1,153,052)	13,468	12,462	(655,702)
<b>Balance Sheet Lines (Pages 2 and 3)</b>					
19. Total admitted assets excluding protected cell business (Page 2, Line 26, Col. 3).....	6,391,755	8,400,624	10,237,534	10,211,766	10,155,979
20. Premiums and considerations (Page 2, Col. 3):					
20.1 In course of collection (Line 15.1).....	390,464	1,314,288	2,309,534	1,971,755	969,907
20.2 Deferred and not yet due (Line 15.2).....	0	0	0	0	0
20.3 Accrued retrospective premiums (Line 15.3).....	0	0	0	0	0
21. Total liabilities excluding protected cell business (Page 3, Line 26).....	3,705,496	4,874,779	5,704,739	5,696,782	5,675,258
22. Losses (Page 3, Line 1).....	2,003,833	2,326,158	2,335,162	2,187,739	2,827,508
23. Loss adjustment expenses (Page 3, Line 3).....	451,741	474,946	556,773	667,267	845,581
24. Unearned premiums (Page 3, Line 9).....	622,224	1,005,153	1,571,267	1,440,933	1,194,323
25. Capital paid up (Page 3, Lines 30 & 31).....	1,001,000	1,001,000	1,001,000	1,001,000	1,001,000
26. Surplus as regards policyholders (Page 3, Line 37).....	2,686,259	3,525,845	4,532,795	4,514,984	4,480,721
<b>Cash Flow (Page 5)</b>					
27. Net cash from operations (Line 11).....	(560,482)	(1,042,361)	(683,210)	(767,365)	520,060
<b>Risk-Based Capital Analysis</b>					
28. Total adjusted capital.....	2,686,259	3,525,845	4,532,795	4,514,984	4,480,721
29. Authorized control level risk-based capital.....	510,643	563,093	561,096	706,268	785,999
<b>Percentage Distribution of Cash, Cash Equivalents and Invested Assets</b> (Page 2, Col. 3) (Item divided by Page 2, Line 12, Col. 3) x 100.0					
30. Bonds (Line 1).....	97.9	97.6	88.6	78.6	84.8
31. Stocks (Lines 2.1 & 2.2).....	0.0	4.1	4.4	9.2	4.4
32. Mortgage loans on real estate (Lines 3.1 & 3.2).....	0.0	0.0	0.0	0.0	0.0
33. Real estate (Lines 4.1, 4.2 & 4.3).....	0.0	0.0	0.0	0.0	0.0
34. Cash, cash equivalents and short-term investments (Line 5).....	2.1	(1.7)	7.0	11.5	10.8
35. Contract loans (Line 6).....	0.0	0.0	0.0	0.0	0.0
36. Derivatives (Line 7).....	0.0	0.0	0.0	0.0	0.0
37. Other invested assets (Line 8).....	0.0	0.0	0.0	0.0	0.0
38. Receivables for securities (Line 9).....	0.0	0.0	0.0	0.7	0.0
39. Securities lending reinvested collateral assets (Line 10).....	0.0	0.0	0.0	0.0	0.0
40. Aggregate write-ins for invested assets (Line 11).....	0.0	0.0	0.0	0.0	0.0
41. Cash, cash equivalents and invested assets (Line 12).....	100.0	100.0	100.0	100.0	100.0
<b>Investments in Parent, Subsidiaries and Affiliates</b>					
42. Affiliated bonds (Sch. D, Summary, Line 12, Col. 1).....	0	0	0	0	0
43. Affiliated preferred stocks (Sch. D, Summary, Line 18, Col. 1).....	0	0	0	0	0
44. Affiliated common stocks (Sch. D, Summary, Line 24, Col. 1).....	0	0	0	0	0
45. Affiliated short-term investments (subtotals included in Schedule DA, Verification, Column 5, Line 10).....	0	0	0	0	0
46. Affiliated mortgage loans on real estate.....	0	0	0	0	0
47. All other affiliated.....	0	0	0	0	0
48. Total of above lines 42 to 47.....	0	0	0	0	0
49. Total investment in parent included in Lines 42 to 47 above.....	0	0	0	0	0
50. Percentage of investments in parent, subsidiaries and affiliates to surplus as regards policyholders (Line 48 above divided by Page 3, Col. 1, Line 37 x 100.0).....	0.0	0.0	0.0	0.0	0.0

FIVE-YEAR HISTORICAL DATA

(Continued)

	1	2	3	4	5
	2016	2015	2014	2013	2012
<b>Capital and Surplus Accounts (Page 4)</b>					
51. Net unrealized capital gains (losses) (Line 24).....	2,754	(7,266)	(14,326)	752	21,881
52. Dividends to stockholders (Line 35).....	0	0	0	0	(117,750)
53. Change in surplus as regards policyholders for the year (Line 38).....	(839,586)	(1,006,950)	17,811	34,263	(590,761)
<b>Gross Losses Paid (Page 9, Part 2, Cols. 1 &amp; 2)</b>					
54. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4).....	5,431,067	6,599,867	5,038,378	4,805,564	5,391,827
55. Property lines (Lines 1, 2, 9, 12, 21 & 26).....	832,300	1,690,737	2,253,198	917,493	1,425,844
56. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27).....	0	0	0	45,000	176,717
57. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34).....	0	0	0	0	0
58. Nonproportional reinsurance lines (Lines 31, 32 & 33).....	0	0	0	0	0
59. Total (Line 35).....	6,263,367	8,290,604	7,291,576	5,768,057	6,994,388
<b>Net Losses Paid (Page 9, Part 2, Col. 4)</b>					
60. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4).....	2,809,652	3,424,636	2,891,445	3,566,447	4,154,043
61. Property lines (Lines 1, 2, 9, 12, 21 & 26).....	446,675	848,137	1,145,343	629,581	846,322
62. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27).....	0	0	0	9,000	35,343
63. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34).....	0	0	0	0	0
64. Nonproportional reinsurance lines (Lines 31, 32 & 33).....	0	0	0	0	0
65. Total (Line 35).....	3,256,327	4,272,773	4,036,788	4,205,028	5,035,708
<b>Operating Percentages (Page 4)</b> (Item divided by Page 4, Line 1) x 100.0					
66. Premiums earned (Line 1).....	100.0	100.0	100.0	100.0	100.0
67. Losses incurred (Line 2).....	71.0	83.8	67.4	57.8	62.7
68. Loss expenses incurred (Line 3).....	22.5	19.6	13.3	12.6	12.0
69. Other underwriting expenses incurred (Line 4).....	34.1	31.9	32.2	39.3	34.7
70. Net underwriting gain (loss) (Line 8).....	(27.6)	(35.3)	(12.9)	(9.8)	(9.4)
<b>Other Percentages</b>					
71. Other underwriting expenses to net premiums written (Page 4, Lines 4 + 5 - 15 divided by Page 8, Part 1B, Col. 6, Line 35 x 100.0).....	29.7	24.8	21.2	32.7	37.2
72. Losses and loss expenses incurred to premiums earned (Page 4, Lines 2 + 3 divided by Page 4, Line 1 x 100.0).....	93.5	103.4	80.7	70.5	74.7
73. Net premiums written to policyholders' surplus (Page 8, Part 1B, Col. 6, Line 35, divided by Page 3, Line 37, Col. 1 x 100.0).....	139.5	128.2	139.8	142.1	181.7
<b>One Year Loss Development (000 omitted)</b>					
74. Development in estimated losses and loss expenses incurred prior to current year (Schedule P, Part 2-Summary, Line 12, Col. 11).....	113	383	(344)	(41)	221
75. Percent of development of losses and loss expenses incurred to policyholders' surplus of prior year-end (Line 74 above divided by Page 4, Line 21, Col. 1 x 100).....	3.2	8.5	(7.6)	(0.9)	4.4
<b>Two Year Loss Development (000 omitted)</b>					
76. Development in estimated losses and loss expenses incurred 2 years before the current year and prior year (Schedule P, Part 2-Summary, Line 12, Col. 12).....	470	(248)	(269)	116	(359)
77. Percent of development of losses and loss expenses incurred to reported policyholders' surplus of second prior-year end (Line 76 above divided by Page 4, Line 21, Col. 2 x 100.0).....	10.4	(5.5)	(6.0)	2.3	(7.5)

If a party to a merger, have the two most recent years of this exhibit been restated due to a merger in compliance with the disclosure requirements of SSAP No. 3, Accounting Changes and Correction of Errors?

Yes [ ] No [ ]

If no, please explain:

**SCHEDULE P - ANALYSIS OF LOSSES AND LOSS EXPENSES**

**SCHEDULE P - PART 1 - SUMMARY**

(\$000 Omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported- Direct and Assumed
	1  Direct and Assumed	2  Ceded	3  Net (Cols. 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10  Salvage and Subrogation Received	11  Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....XXX.....
2. 2007.....	.....6,443.....	.....9.....	.....6,434.....	.....4,276.....	.....0.....	.....171.....	.....0.....	.....591.....	.....0.....	.....70.....	.....5,038.....	.....XXX.....
3. 2008.....	.....7,518.....	.....80.....	.....7,438.....	.....4,876.....	.....23.....	.....178.....	.....0.....	.....668.....	.....4.....	.....68.....	.....5,695.....	.....XXX.....
4. 2009.....	.....7,361.....	.....129.....	.....7,232.....	.....4,009.....	.....39.....	.....137.....	.....0.....	.....568.....	.....11.....	.....93.....	.....4,664.....	.....XXX.....
5. 2010.....	.....8,915.....	.....1,117.....	.....7,798.....	.....5,823.....	.....1,268.....	.....150.....	.....26.....	.....849.....	.....87.....	.....125.....	.....5,441.....	.....XXX.....
6. 2011.....	.....11,160.....	.....2,680.....	.....8,480.....	.....7,527.....	.....2,623.....	.....240.....	.....62.....	.....910.....	.....184.....	.....146.....	.....5,808.....	.....XXX.....
7. 2012.....	.....10,391.....	.....1,958.....	.....8,433.....	.....6,514.....	.....1,456.....	.....170.....	.....40.....	.....852.....	.....112.....	.....135.....	.....5,928.....	.....XXX.....
8. 2013.....	.....9,127.....	.....2,959.....	.....6,168.....	.....5,322.....	.....1,754.....	.....78.....	.....28.....	.....810.....	.....92.....	.....57.....	.....4,336.....	.....XXX.....
9. 2014.....	.....12,262.....	.....6,056.....	.....6,206.....	.....8,985.....	.....4,464.....	.....274.....	.....137.....	.....1,120.....	.....138.....	.....119.....	.....5,640.....	.....XXX.....
10. 2015.....	.....10,172.....	.....5,086.....	.....5,086.....	.....6,925.....	.....3,460.....	.....103.....	.....52.....	.....951.....	.....97.....	.....105.....	.....4,370.....	.....XXX.....
11. 2016.....	.....7,448.....	.....3,318.....	.....4,130.....	.....3,082.....	.....1,451.....	.....13.....	.....7.....	.....606.....	.....48.....	.....24.....	.....2,195.....	.....XXX.....
12. Totals.....	.....XXX.....	.....XXX.....	.....XXX.....	.....57,339.....	.....16,538.....	.....1,514.....	.....352.....	.....7,925.....	.....773.....	.....942.....	.....49,115.....	.....XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23  Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25  Number of Claims Outstanding-Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1. Prior.....	5	0	0	0	0	0	0	0	0	0	0	5	XXX
2. 2007.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
3. 2008.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
4. 2009.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
5. 2010.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
6. 2011.....	6	5	0	0	0	0	0	0	0	0	0	1	XXX
7. 2012.....	10	3	0	0	0	0	2	0	1	0	0	10	XXX
8. 2013.....	90	28	8	3	0	0	7	3	6	0	0	77	XXX
9. 2014.....	330	163	54	27	0	0	49	24	37	6	1	250	XXX
10. 2015.....	685	343	214	107	0	0	75	37	111	24	4	574	XXX
11. 2016.....	1,429	570	699	278	0	0	57	24	286	60	21	1,539	XXX
12. Totals...	2,555	1,112	975	415	0	0	190	88	441	90	26	2,456	XXX

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34  Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves after Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior..	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0.....	.....0.....	.....XXX.....	.....5.....	.....0.....
2. 2007.	.....5,038.....	.....0.....	.....5,038.....	.....78.2.....	.....0.0.....	.....78.3.....	.....0.....	.....0.....	.....0.00.....	.....0.....	.....0.....
3. 2008.	.....5,722.....	.....27.....	.....5,695.....	.....76.1.....	.....33.8.....	.....76.6.....	.....0.....	.....0.....	.....0.00.....	.....0.....	.....0.....
4. 2009.	.....4,714.....	.....50.....	.....4,664.....	.....64.0.....	.....38.8.....	.....64.5.....	.....0.....	.....0.....	.....0.00.....	.....0.....	.....0.....
5. 2010.	.....6,822.....	.....1,381.....	.....5,441.....	.....76.5.....	.....123.6.....	.....69.8.....	.....0.....	.....0.....	.....0.00.....	.....0.....	.....0.....
6. 2011.	.....8,683.....	.....2,874.....	.....5,809.....	.....77.8.....	.....107.2.....	.....68.5.....	.....0.....	.....0.....	.....0.00.....	.....1.....	.....0.....
7. 2012.	.....7,549.....	.....1,611.....	.....5,938.....	.....72.6.....	.....82.3.....	.....70.4.....	.....0.....	.....0.....	.....0.00.....	.....7.....	.....3.....
8. 2013.	.....6,321.....	.....1,908.....	.....4,413.....	.....69.3.....	.....64.5.....	.....71.5.....	.....0.....	.....0.....	.....0.00.....	.....67.....	.....10.....
9. 2014.	.....10,849.....	.....4,959.....	.....5,890.....	.....88.5.....	.....81.9.....	.....94.9.....	.....0.....	.....0.....	.....0.00.....	.....194.....	.....56.....
10. 2015.	.....9,064.....	.....4,120.....	.....4,944.....	.....89.1.....	.....81.0.....	.....97.2.....	.....0.....	.....0.....	.....0.00.....	.....449.....	.....125.....
11. 2016.	.....6,172.....	.....2,438.....	.....3,734.....	.....82.9.....	.....73.5.....	.....90.4.....	.....0.....	.....0.....	.....0.00.....	.....1,280.....	.....259.....
12. Totals	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0.....	.....0.....	.....XXX.....	.....2,003.....	.....453.....

Note: Parts 2 and 4 are gross of all discounting, including tabular discounting. Part 1 is gross of only nontabular discounting, which is reported in Columns 32 and 33 of Part 1. The tabular discount, if any, is reported in the Notes to Financial Statements, which will reconcile Part 1 with Parts 2 and 4.

SCHEDULE P - PART 2 - SUMMARY

Years in Which Losses Were Incurred	Incurred Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)										DEVELOPMENT	
	1	2	3	4	5	6	7	8	9	10	11	12
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	One Year	Two Year
1. Prior.....	.....800.....	.....733.....	.....769.....	.....772.....	.....737.....	.....729.....	.....729.....	.....729.....	.....734.....	.....734.....	.....0.....	.....5.....
2. 2007.....	.....4,591.....	.....4,495.....	.....4,419.....	.....4,459.....	.....4,446.....	.....4,433.....	.....4,433.....	.....4,433.....	.....4,443.....	.....4,447.....	.....4.....	.....14.....
3. 2008.....	.....XXX.....	.....4,996.....	.....5,197.....	.....5,111.....	.....5,048.....	.....5,032.....	.....5,034.....	.....5,032.....	.....5,032.....	.....5,031.....	.....(1).....	.....(1).....
4. 2009.....	.....XXX.....	.....XXX.....	.....4,513.....	.....4,219.....	.....4,157.....	.....4,139.....	.....4,107.....	.....4,105.....	.....4,107.....	.....4,107.....	.....0.....	.....2.....
5. 2010.....	.....XXX.....	.....XXX.....	.....XXX.....	.....4,881.....	.....4,723.....	.....4,750.....	.....4,708.....	.....4,685.....	.....4,679.....	.....4,679.....	.....0.....	.....(6).....
6. 2011.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....4,938.....	.....5,187.....	.....5,154.....	.....5,086.....	.....5,085.....	.....5,083.....	.....(2).....	.....(3).....
7. 2012.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....5,260.....	.....5,324.....	.....5,191.....	.....5,208.....	.....5,197.....	.....(11).....	.....6.....
8. 2013.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....3,710.....	.....3,594.....	.....3,663.....	.....3,689.....	.....26.....	.....95.....
9. 2014.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....4,519.....	.....4,806.....	.....4,877.....	.....71.....	.....358.....
10. 2015.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....3,977.....	.....4,003.....	.....26.....	.....XXX.....
11. 2016.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....2,950.....	.....XXX.....	.....XXX.....
12. Totals.....											.....113.....	.....470.....

SCHEDULE P - PART 3 - SUMMARY

Years in Which Losses Were Incurred	Cumulative Paid Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)										11	12
	1	2	3	4	5	6	7	8	9	10	Number of Claims Closed With Loss Payment	Number of Claims Closed Without Loss Payment
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016		
1. Prior.....	.....000.....	.....491.....	.....632.....	.....729.....	.....729.....	.....729.....	.....729.....	.....729.....	.....729.....	.....729.....	.....XXX.....	.....XXX.....
2. 2007.....	.....2,595.....	.....3,911.....	.....4,229.....	.....4,401.....	.....4,430.....	.....4,433.....	.....4,433.....	.....4,433.....	.....4,433.....	.....4,447.....	.....XXX.....	.....XXX.....
3. 2008.....	.....XXX.....	.....2,728.....	.....4,414.....	.....4,911.....	.....4,961.....	.....5,008.....	.....5,032.....	.....5,032.....	.....5,032.....	.....5,031.....	.....XXX.....	.....XXX.....
4. 2009.....	.....XXX.....	.....XXX.....	.....2,601.....	.....3,547.....	.....3,939.....	.....4,099.....	.....4,082.....	.....4,103.....	.....4,102.....	.....4,107.....	.....XXX.....	.....XXX.....
5. 2010.....	.....XXX.....	.....XXX.....	.....XXX.....	.....2,709.....	.....4,116.....	.....4,572.....	.....4,623.....	.....4,679.....	.....4,679.....	.....4,679.....	.....XXX.....	.....XXX.....
6. 2011.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....3,045.....	.....4,551.....	.....4,916.....	.....5,008.....	.....5,076.....	.....5,082.....	.....XXX.....	.....XXX.....
7. 2012.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....3,022.....	.....4,672.....	.....5,007.....	.....5,137.....	.....5,188.....	.....XXX.....	.....XXX.....
8. 2013.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....2,298.....	.....3,166.....	.....3,513.....	.....3,618.....	.....XXX.....	.....XXX.....
9. 2014.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....2,736.....	.....4,256.....	.....4,658.....	.....XXX.....	.....XXX.....
10. 2015.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....2,347.....	.....3,516.....	.....XXX.....	.....XXX.....
11. 2016.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....1,637.....	.....XXX.....	.....XXX.....

SCHEDULE P - PART 4 - SUMMARY

Years in Which Losses Were Incurred	Bulk and IBNR Reserves on Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)									
	1	2	3	4	5	6	7	8	9	10
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior.....	.....291.....	.....100.....	.....25.....	.....6.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
2. 2007.....	.....597.....	.....241.....	.....61.....	.....23.....	.....1.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
3. 2008.....	.....XXX.....	.....701.....	.....247.....	.....91.....	.....25.....	.....4.....	.....2.....	.....0.....	.....0.....	.....0.....
4. 2009.....	.....XXX.....	.....XXX.....	.....768.....	.....211.....	.....63.....	.....20.....	.....5.....	.....2.....	.....0.....	.....0.....
5. 2010.....	.....XXX.....	.....XXX.....	.....XXX.....	.....781.....	.....262.....	.....83.....	.....17.....	.....6.....	.....0.....	.....0.....
6. 2011.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....677.....	.....243.....	.....60.....	.....14.....	.....1.....	.....0.....
7. 2012.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....738.....	.....189.....	.....36.....	.....8.....	.....2.....
8. 2013.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....542.....	.....110.....	.....34.....	.....9.....
9. 2014.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....466.....	.....131.....	.....52.....
10. 2015.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....444.....	.....145.....
11. 2016.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....454.....



West Virginia National Auto Insurance Company  
SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN  
Allocated by States and Territories

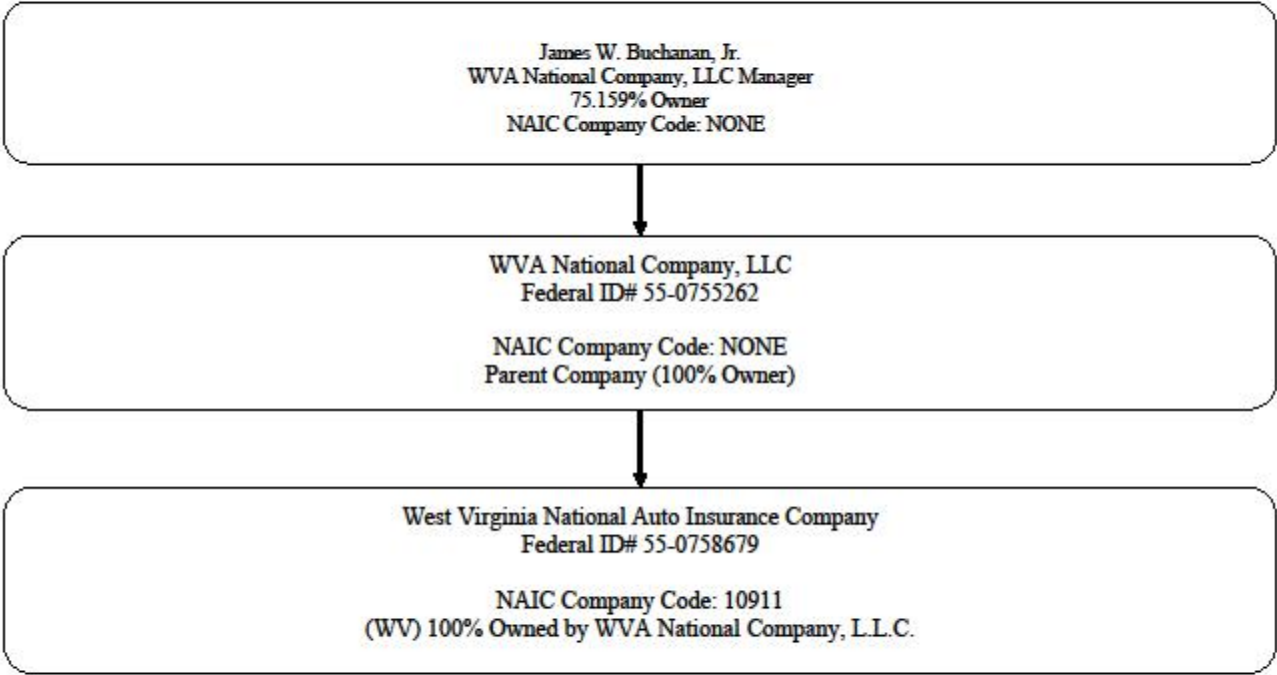
		1  Active Status	Gross Premiums, Including Policy and Membership Fees Less Return Premiums and Premiums on Policies Not Taken		4  Dividends Paid or Credited to Policyholders on Direct Business	5  Direct Losses Paid (Deducting Salvage)	6  Direct Losses Incurred	7  Direct Losses Unpaid	8  Finance and Service Charges not Included in Premiums	9  Direct Premiums Written for Federal Purchasing Groups (Incl. in Col. 2)
			2  Direct Premiums Written	3  Direct Premiums Earned						
States, Etc.										
1.	Alabama.....AL	...N....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
2.	Alaska.....AK	...N....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
3.	Arizona.....AZ	...N....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
4.	Arkansas.....AR	...N....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
5.	California.....CA	...N....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
6.	Colorado.....CO	...N....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
7.	Connecticut.....CT	...N....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
8.	Delaware.....DE	...N....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
9.	District of Columbia.....DC	...N....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
10.	Florida.....FL	...N....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
11.	Georgia.....GA	...N....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
12.	Hawaii.....HI	...N....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
13.	Idaho.....ID	...N....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
14.	Illinois.....IL	...N....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
15.	Indiana.....IN	...N....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
16.	Iowa.....IA	...N....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
17.	Kansas.....KS	...N....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.	Kentucky.....KY	...N....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
19.	Louisiana.....LA	...N....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
20.	Maine.....ME	...N....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
21.	Maryland.....MD	...N....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
22.	Massachusetts.....MA	...N....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
23.	Michigan.....MI	...N....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
24.	Minnesota.....MN	...N....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
25.	Mississippi.....MS	...N....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
26.	Missouri.....MO	...N....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
27.	Montana.....MT	...N....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
28.	Nebraska.....NE	...N....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
29.	Nevada.....NV	...N....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
30.	New Hampshire.....NH	...N....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
31.	New Jersey.....NJ	...N....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
32.	New Mexico.....NM	...N....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
33.	New York.....NY	...N....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
34.	North Carolina.....NC	...N....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
35.	North Dakota.....ND	...N....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
36.	Ohio.....OH	...N....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
37.	Oklahoma.....OK	...N....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
38.	Oregon.....OR	...N....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
39.	Pennsylvania.....PA	...N....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
40.	Rhode Island.....RI	...N....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
41.	South Carolina.....SC	...N....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
42.	South Dakota.....SD	...N....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
43.	Tennessee.....TN	...N....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
44.	Texas.....TX	...N....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
45.	Utah.....UT	...N....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
46.	Vermont.....VT	...N....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
47.	Virginia.....VA	...L....	.....(7,408)	.....1,252,996	.....0	.....1,860,958	.....1,554,993	.....924,048	.....135,166	.....0
48.	Washington.....WA	...N....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
49.	West Virginia.....WV	...L....	.....6,234,662	.....6,195,371	.....0	.....4,402,408	.....3,710,613	.....2,606,355	.....180,922	.....0
50.	Wisconsin.....WI	...N....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
51.	Wyoming.....WY	...N....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
52.	American Samoa.....AS	...N....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
53.	Guam.....GU	...N....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
54.	Puerto Rico.....PR	...N....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
55.	US Virgin Islands.....VI	...N....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
56.	Northern Mariana Islands.....MP	...N....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
57.	Canada.....CAN	...N....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
58.	Aggregate Other Alien.....OT	...XXX..	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
59.	Totals.....	(a)....2	.....6,227,254	.....7,448,367	.....0	.....6,263,366	.....5,265,606	.....3,530,403	.....316,088	.....0

DETAILS OF WRITE-INS

58001. ....	XXX	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
58002. ....	XXX	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
58003. ....	XXX	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
58998. Summary of remaining write-ins for Line 58 from overflow page	XXX	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
58999. Totals (Lines 58001 thru 58003+ Line 58998) (Line 58 above)	XXX	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0

(a) Insert the number of "L" responses except for Canada and Other Alien.  
(L) - Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) - Registered - Non-domiciled RRGs; (Q) - Qualified - Qualified or Accredited Reinsurer;  
(E) - Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state; (N) - None of the above - Not allowed to write business in the state.  
Explanation of Basis of Allocation of Premiums by States, etc.

**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
PART 1 – ORGANIZATIONAL CHART



2016 ALPHABETICAL INDEX -- PROPERTY & CASUALTY ANNUAL STATEMENT BLANK

Assets	2	Schedule P-Part 2G-Special Liability (Ocean Marine, Aircraft (All Perils), Boiler & Machinery)	58
Cash Flow	5	Schedule P-Part 2H-Section 1-Other Liability-Occurrence	58
Exhibit of Capital Gains (Losses)	12	Schedule P-Part 2H-Section 2-Other Liability-Claims-Made	58
Exhibit of Net Investment Income	12	Schedule P-Part 2I-Spec. Prop. (Fire, Allied Lines, Inland Marine, Earthquake, Burglary, Theft)	59
Exhibit of Nonadmitted Assets	13	Schedule P-Part 2J-Auto Physical Damage	59
Exhibit of Premiums and Losses (State Page)	19	Schedule P-Part 2K-Fidelity, Surety	59
Five-Year Historical Data	17	Schedule P-Part 2L-Other (Including Credit, Accident and Health)	59
General Interrogatories	15	Schedule P-Part 2M-International	59
Jurat Page	1	Schedule P-Part 2N-Reinsurance – Nonproportional Assumed Property	60
Liabilities, Surplus and Other Funds	3	Schedule P-Part 2O-Reinsurance – Nonproportional Assumed Liability	60
Notes To Financial Statements	14	Schedule P-Part 2P-Reinsurance – Nonproportional Assumed Financial Lines	60
Overflow Page For Write-ins	100	Schedule P-Part 2R-Section 1-Products Liability-Occurrence	61
Schedule A-Part 1	E01	Schedule P-Part 2R-Section 2-Products Liability-Claims-Made	61
Schedule A-Part 2	E02	Schedule P-Part 2S-Financial Guaranty/Mortgage Guaranty	61
Schedule A-Part 3	E03	Schedule P-Part 2T-Warranty	61
Schedule A-Verification Between Years	SI02	Schedule P-Part 3A-Homeowners/Farmowners	62
Schedule B-Part 1	E04	Schedule P-Part 3B-Private Passenger Auto Liability/Medical	62
Schedule B-Part 2	E05	Schedule P-Part 3C-Commercial Auto/Truck Liability/Medical	62
Schedule B-Part 3	E06	Schedule P-Part 3D-Workers' Compensation (Excluding Excess Workers Compensation)	62
Schedule B-Verification Between Years	SI02	Schedule P-Part 3E-Commercial Multiple Peril	62
Schedule BA-Part 1	E07	Schedule P-Part 3F-Section 1 –Medical Professional Liability-Occurrence	63
Schedule BA-Part 2	E08	Schedule P-Part 3F-Section 2-Medical Professional Liability-Claims-Made	63
Schedule BA-Part 3	E09	Schedule P-Part 3G-Special Liability (Ocean Marine, Aircraft (All Perils), Boiler & Machinery)	63
Schedule BA-Verification Between Years	SI03	Schedule P-Part 3H-Section 1-Other Liability-Occurrence	63
Schedule D-Part 1	E10	Schedule P-Part 3H-Section 2-Other Liability-Claims-Made	63
Schedule D-Part 1A-Section 1	SI05	Schedule P-Part 3I-Spec. Prop. (Fire, Allied Lines, Inland Marine, Earthquake, Burglary, Theft)	64
Schedule D-Part 1A-Section 2	SI08	Schedule P-Part 3J-Auto Physical Damage	64
Schedule D-Part 2-Section 1	E11	Schedule P-Part 3K-Fidelity/Surety	64
Schedule D-Part 2-Section 2	E12	Schedule P-Part 3L-Other (Including Credit, Accident and Health)	64
Schedule D-Part 3	E13	Schedule P-Part 3M-International	64
Schedule D-Part 4	E14	Schedule P-Part 3N-Reinsurance – Nonproportional Assumed Property	65
Schedule D-Part 5	E15	Schedule P-Part 3O-Reinsurance – Nonproportional Assumed Liability	65
Schedule D-Part 6-Section 1	E16	Schedule P-Part 3P-Reinsurance – Nonproportional Assumed Financial Lines	65
Schedule D-Part 6-Section 2	E16	Schedule P-Part 3R-Section 1-Products Liability-Occurrence	66
Schedule D-Summary By Country	SI04	Schedule P-Part 3R-Section 2-Products Liability-Claims-Made	66
Schedule D-Verification Between Years	SI03	Schedule P-Part 3S-Financial Guaranty/Mortgage Guaranty	66
Schedule DA-Part 1	E17	Schedule P-Part 3T-Warranty	66
Schedule DA-Verification Between Years	SI10	Schedule P-Part 4A-Homeowners/Farmowners	67
Schedule DB-Part A-Section 1	E18	Schedule P-Part 4B-Private Passenger Auto Liability/Medical	67
Schedule DB-Part A-Section 2	E19	Schedule P-Part 4C-Commercial Auto/Truck Liability/Medical	67
Schedule DB-Part A-Verification Between Years	SI11	Schedule P-Part 4D-Workers' Compensation (Excluding Excess Workers Compensation)	67
Schedule DB-Part B-Section 1	E20	Schedule P-Part 4E-Commercial Multiple Peril	67
Schedule DB-Part B-Section 2	E21	Schedule P-Part 4F-Section 1-Medical Professional Liability-Occurrence	68
Schedule DB-Part B-Verification Between Years	SI11	Schedule P-Part 4F-Section 2-Medical Professional Liability-Claims-Made	68
Schedule DB-Part C-Section 1	SI12	Schedule P-Part 4G-Special Liability (Ocean Marine, Aircraft (All Perils), Boiler & Machinery)	68
Schedule DB-Part C-Section 2	SI13	Schedule P-Part 4H-Section 1-Other Liability-Occurrence	68
Schedule DB-Part D-Section 1	E22	Schedule P-Part 4H-Section 2-Other Liability-Claims-Made	68
Schedule DB-Part D-Section 2	E23	Schedule P-Part 4I-Spec. Prop. (Fire, Allied Lines, Inland Marine, Earthquake, Burglary & Theft)	69
Schedule DB-Verification	SI14	Schedule P-Part 4J-Auto Physical Damage	69
Schedule DL-Part 1	E24	Schedule P-Part 4K-Fidelity/Surety	69
Schedule DL-Part 2	E25	Schedule P-Part 4L-Other (Including Credit, Accident and Health)	69
Schedule E-Part 1-Cash	E26	Schedule P-Part 4M-International	69
Schedule E-Part 2-Cash Equivalents	E27	Schedule P-Part 4N-Reinsurance – Nonproportional Assumed Property	70
Schedule E-Part 3-Special Deposits	E28	Schedule P-Part 4O-Reinsurance – Nonproportional Assumed Liability	70
Schedule E-Verification Between Years	SI15	Schedule P-Part 4P-Reinsurance – Nonproportional Assumed Financial Lines	70
Schedule F-Part 1	20	Schedule P-Part 4R-Section 1-Products Liability-Occurrence	71
Schedule F-Part 2	21	Schedule P-Part 4R-Section 2-Products Liability-Claims-Made	71
Schedule F-Part 3	22	Schedule P-Part 4S-Financial Guaranty/Mortgage Guaranty	71
Schedule F-Part 4	23	Schedule P-Part 4T-Warranty	71
Schedule F-Part 5	24	Schedule P-Part 5A-Homeowners/Farmowners	72
Schedule F-Part 6-Section 1	25	Schedule P-Part 5B-Private Passenger Auto Liability/Medical	73
Schedule F-Part 6-Section 2	26	Schedule P-Part 5C-Commercial Auto/Truck Liability/Medical	74
Schedule F-Part 7	27	Schedule P-Part 5D-Workers' Compensation (Excluding Excess Workers Compensation)	75
Schedule F-Part 8	28	Schedule P-Part 5E-Commercial Multiple Peril	76
Schedule F-Part 9	29	Schedule P-Part 5F-Medical Professional Liability-Claims-Made	78
Schedule H-Accident and Health Exhibit-Part 1	30	Schedule P-Part 5F-Medical Professional Liability-Occurrence	77
Schedule H-Part 2, Part 3 and Part 4	31	Schedule P-Part 5H-Other Liability-Claims-Made	80
Schedule H-Part 5-Health Claims	32	Schedule P-Part 5H-Other Liability-Occurrence	79
Schedule P-Part 1-Summary	33	Schedule P-Part 5R-Products Liability-Claims-Made	82
Schedule P-Part 1A-Homeowners/Farmowners	35	Schedule P-Part 5R-Products Liability-Occurrence	81
Schedule P-Part 1B-Private Passenger Auto Liability/Medical	36	Schedule P-Part 5T-Warranty	83
Schedule P-Part 1C-Commercial Auto/Truck Liability/Medical	37	Schedule P-Part 6C-Commercial Auto/Truck Liability/Medical	84
Schedule P-Part 1D-Workers' Compensation (Excluding Excess Workers Compensation)	38	Schedule P-Part 6D-Workers' Compensation (Excluding Excess Workers Compensation)	84
Schedule P-Part 1E-Commercial Multiple Peril	39	Schedule P-Part 6E-Commercial Multiple Peril	85
Schedule P-Part 1F-Section 1-Medical Professional Liability-Occurrence	40	Schedule P-Part 6H-Other Liability-Claims-Made	86
Schedule P-Part 1F-Section 2-Medical Professional Liability-Claims-Made	41	Schedule P-Part 6H-Other Liability-Occurrence	85
Schedule P-Part 1G-Special Liability (Ocean, Marine, Aircraft (All Perils), Boiler & Machinery)	42	Schedule P-Part 6M-International	86
Schedule P-Part 1H-Section 1-Other Liability-Occurrence	43	Schedule P-Part 6N-Reinsurance – Nonproportional Assumed Property	87
Schedule P-Part 1H-Section 2-Other Liability-Claims-Made	44	Schedule P-Part 6O-Reinsurance – Nonproportional Assumed Liability	87
Schedule P-Part 1I-Spec. Prop. (Fire, Allied Lines, Inland Marine, Earthquake, Burglary & Theft)	45	Schedule P-Part 6R-Products Liability-Claims-Made	88
Schedule P-Part 1J-Auto Physical Damage	46	Schedule P-Part 6R-Products Liability-Occurrence	88
Schedule P-Part 1K-Fidelity/Surety	47	Schedule P-Part 7A-Primary Loss Sensitive Contracts	89
Schedule P-Part 1L-Other (Including Credit, Accident and Health)	48	Schedule P-Part 7B-Reinsurance Loss Sensitive Contracts	91
Schedule P-Part 1M-International	49	Schedule P Interrogatories	93
Schedule P-Part 1N-Reinsurance – Nonproportional Assumed Property	50	Schedule T-Exhibit of Premiums Written	94
Schedule P-Part 1O-Reinsurance – Nonproportional Assumed Liability	51	Schedule T-Part 2-Interstate Compact	95
Schedule P-Part 1P-Reinsurance – Nonproportional Assumed Financial Lines	52	Schedule Y-Information Concerning Activities of Insurer Members of a Holding Company Group	96
Schedule P-Part 1R-Section 1-Products Liability-Occurrence	53	Schedule Y-Detail of Insurance Holding Company System	97
Schedule P-Part 1R-Section 2-Products Liability-Claims-Made	54	Schedule Y-Part 2-Summary of Insurer's Transactions With Any Affiliates	98
Schedule P-Part 1S-Financial Guaranty/Mortgage Guaranty	55	Statement of Income	4
Schedule P-Part 1T-Warranty	56	Summary Investment Schedule	SI01
Schedule P-Part 2, Part 3 and Part 4 - Summary	34	Supplemental Exhibits and Schedules Interrogatories	99
Schedule P-Part 2A-Homeowners/Farmowners	57	Underwriting and Investment Exhibit Part 1	6
Schedule P-Part 2B-Private Passenger Auto Liability/Medical	57	Underwriting and Investment Exhibit Part 1A	7
Schedule P-Part 2C-Commercial Auto/Truck Liability/Medical	57	Underwriting and Investment Exhibit Part 1B	8
Schedule P-Part 2D-Workers' Compensation (Excluding Excess Workers Compensation)	57	Underwriting and Investment Exhibit Part 2	9
Schedule P-Part 2E-Commercial Multiple Peril	57	Underwriting and Investment Exhibit Part 2A	10
Schedule P-Part 2F-Section 1-Medical Professional Liability-Occurrence	58	Underwriting and Investment Exhibit Part 3	11
Schedule P-Part 2F-Section 2-Medical Professional Liability-Claims-Made	58		